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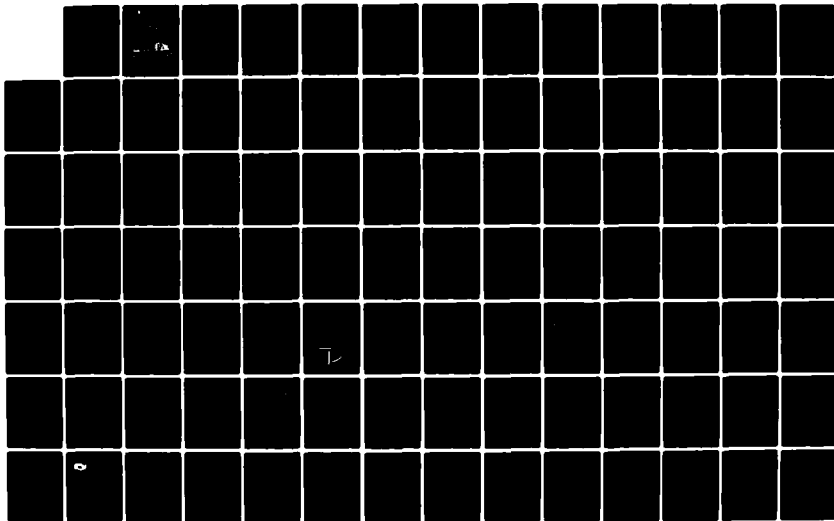
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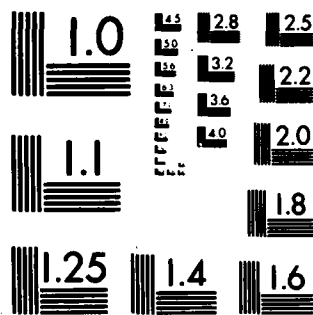
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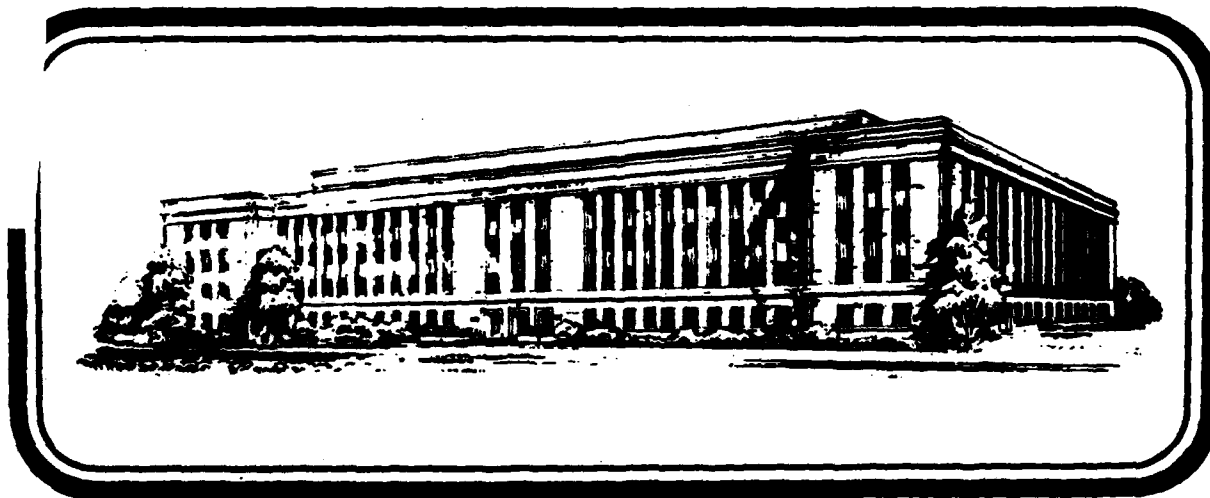


NATIONAL DEFENSE UNIVERSITY

**MOBILIZATION AND DEFENSE MANAGEMENT  
TECHNICAL REPORTS SERIES**

**MILITARY HEALTH PROFESSIONAL NEEDS  
FOR MOBILIZATION**

AD A137678



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THE INDUSTRIAL COLLEGE OF THE ARMED FORCES  
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MOBILIZATION STUDIES PROGRAM REPORT  
MILITARY HEALTH PROFESSIONAL NEEDS FOR MOBILIZATION

by  
MARSHALL S. DUNY, CDR, USN  
LAWRENCE J. RYAN, JR., LTC, USA  
STEPHEN A. SADLER, MR., DLA

A RESEARCH REPORT SUBMITTED TO THE FACULTY  
IN  
FULFILLMENT OF THE RESEARCH  
REQUIREMENT

RESEARCH SUPERVISOR: Mr. John J. Moscato

THE INDUSTRIAL COLLEGE OF THE ARMED FORCES

May 1983

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**ABSTRACT OF STUDENT RESEARCH REPORT  
INDUSTRIAL COLLEGE OF THE ARMED FORCES**

<b>NAME OF RESEARCHER (S)</b> DUNY, Marshall S., CDR, USN RYAN, Lawrence J. Jr., LTC, USA SADLER, Stephen A., DLA	<b>TITLE OF REPORT</b> Military Health Professional Needs for Mobilization
<b>SECURITY CLASSIFICATION OF REPORT</b> UNCLASSIFIED	<b>REPORT NUMBER</b> MSP # 10

**ABSTRACT**

**Problem Statement:** The numbers of active duty health care manpower resources are not sufficient to meet the total needs of the mobilization force structure. In the event of mobilization this nation would have to locate, assign and put in place additional medical resources to meet expanded requirements. Given the current inadequacy of active duty resources to meet mobilization needs and the inability to identify health care resources in the civilian community by Selective Service a system should be developed to provide for registration, maintenance, and activation of specific skills in the health care professions for mobilization. This paper will examine the issues surrounding this problem.

**Findings/Conclusions:** The existing registration requirement instituted in July 1980 is deficient in the following ways:

1. The information for the identification of health care personnel is not currently maintained.
2. The failure to address female personnel or occupations normally filled by enlisted personnel in the military.
3. The age limit may adversely affect the Selective Service System ability to provide the services with the required skill levels in many of the physician positions.

The Department of Defense must be able to provide the Selective Service its medical requirements by specialty.

**Recommendations:**

1. Modify the existing Military Selective Service Act to allow for a pre-registered manpower pool.
2. Identify the medical manpower pool available within the civilian community.
3. Develop a mechanism to cross reference civilian skills to military skills.
4. Develop a mechanism for substituting civilian/military skills.

**THIS ABSTRACT IS UNCLASSIFIED**



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## EXECUTIVE SUMMARY

This study analyzed the adequacy of the active duty health care manpower resources to meet the total needs of the mobilization force structure. This study reviewed the existing such mobilization medical personnel requirements as determined by the Department of Defense and the adequacy of existing plans for responding to those requirements. The study also examined the process and methods for meeting the health personnel requirements plans. These areas included the adequacy of the reserves, the doctor draft and various other techniques for obtaining the required number of health care personnel to support a mobilization contingency.

The central theme of the study evolved into the fact that the number of active duty health care manpower resources are not sufficient to meet the total needs of the mobilization force structure. In the event of mobilization this nation would have to locate, assign and put in place additional medical resources to meet expanded requirements. Given the current inadequacy of active duty resources to meet mobilization needs and the inability to identify health care resources in the civilian community by Selective Service, the study examined how best to provide for registration, maintenance, and activation of specific skills in the health care professions for mobilization.

This exhaustive review concluded with several poignant considerations regarding the acquisition of health care personnel. These critical consequences and the fundamental analysis which support them supplies the mechanisms which lead to the resolution of the central problem.

A compendium of the key conclusions of this analysis is as follows:

1. The existing registration requirement instituted in July 1980 is deficient.
2. The information for the identification of health care personnel is not currently maintained.
3. The failure to address female personnel as well as occupations normally filled by enlisted personnel in the military.
4. The age limit which adversely affects the Selective Service System's ability to provide the services with the required skill level in many of the physician positions.

## CHAPTER I

### INTRODUCTION

In the event of mobilization this nation would have to locate, assign, and put in place additional medical resources to meet expanded requirements. While it appears that the current health care needs of the Armed Forces are being met by the medical departments of the three Armed Services, the number of active duty health care manpower resources are not sufficient to meet the total requirements of the mobilization force structure. Based on current mobilization scenarios, there is little doubt that there will be a dramatic increase in the need for qualified health care personnel. Further there is no assurance that volunteer resources can or will keep pace with the increasing demand for health care services in the event of an emergency causing the U.S. to deploy its forces in combat. Presently, the Selective Service System does not have the authority to register, select, process or call for induction health care professionals, paraprofessionals or technical personnel to fill the need for military health care providers in the event of national emergency necessitating mobilization.

The capability to separately register, select, and call health care professionals for induction expired in 1973, at the same time the regular draft expired. The subsequent suspension of registration in 1975 effectively eliminated the capability to identify health care professionals, and the reinstitution of registration in 1980 did not include any provision for the identification and registration of special registrants by occupation (such as health care professionals).

Based on interviews with knowledgeable personnel<sup>1</sup> it is apparent there is a requirement for a reliable method to respond to a DOD call for health care personnel in the event of mobilization. This situation is neither new nor unique and is recognized as a serious weakness to our nation's mobilization capability. The objective of this paper is to review the history associated with the Doctor Draft and the provisions of the current military Selective Service Act; present some ideas on employment of medical occupational skills for DOD and Selective Services consideration; to recommend some possible courses of action; and to offer some conclusions by the authors.

## CHAPTER II

### DISCUSSION

Since the late 1940's DOD has had difficulty in recruiting and retaining military physicians. After the end of World War Two, the retention problem became particularly acute and has not been totally overcome to this day. In order to provide adequate medical services for the Armed Forces during the Korean War, Congress passed specific legislation pertaining to physicians. This legislation was actually an amendment to the Selective Service Act of 1948 and was the so-called "Doctors Draft" (DD Act) which was enacted on September 9, 1950.<sup>2</sup> This act, for the first time, authorized the induction of persons by professional abilities and skills rather than by age.

The DD Act authorized the special registration and special calls for males qualified in medical, dental and allied health specialties who were not more than fifty one years old at the time of registration. Presidential Proclamation Number 2906 covered Special Registration Number 1. The Proclamation was issued on 6 October 1950 and set 16 October 1950 for registration. Further the Proclamation required any person receiving a degree in medicine, dentistry or veterinary medicine after 16 October 1950 to register within five days thereafter.<sup>3</sup> In effect the DD Act became a separate draft system with its own list of registrants.

Shortly thereafter a National Advisory Committee on special registrants was appointed by the President under the authority of an amendment to the DD Act. Its function was to advise Selective Service regarding the program for

special registrants and to work in cooperation with State Directors of Selective Service through state chairmen and members of State Advisory Committees. Despite its value, the committee was allowed to expire when the draft was abolished.

Soon after registration certain categories of medical personnel were advised to make immediate application for commission in the Armed Forces. The four categories of personnel were:

First. Those persons who participated as students in the Army specialized training program or similar programs administered by the Navy, and those persons who were deferred from service during World War II for the purpose of pursuing a course of instruction leading to education in one of the categories referred to previously who have had less than ninety days of active duty in the Army, Air Force, Navy, Marine Corps, Coast Guard, or the Public Health Service subsequent to the completion of, or release from, the program or course of instruction (exclusive of the time spent in postgraduate training).

Second. Those persons who participated as students in the Army specialized training program or similar programs administered by the Navy, and those persons who were deferred from service during World War II for the purpose of pursuing a course of instruction leading to education in one of the above categories, who have had ninety days or more but less than twenty-one months of active duty in the Army, Air Force, Navy, Marine Corps, Coast Guard, or the Public Health Service subsequent to the completion of, or release from, the program or course of instruction (exclusive of the time spent in post-graduate training).

Third. Those who did not have active service in the Army, Air Force, Navy, Marine Corps, Coast Guard, or the public Health Service subsequent to September 16, 1940.

Fourth. Those not included in the first and second priority who have had active service in the Army, Air Force, Navy, Marine Corps, Coast Guard, or the Public Health Service subsequent to September 16, 1940. Inductions of persons in this priority shall be made in accordance with regulations prescribed by the President which may provide for the classification of such persons into groups according to the number of full months of such service which they have had and for the induction of the members of any such group after the induction of the members of any other such group having a lesser number of full months of such service.

Congress had provided that those who entered "voluntarily" would receive an additional \$100 pay monthly, putting them on the same basis as other officers in the medical corps. If they waited for induction they would not receive the extra pay and might have to serve as privates for some time after induction while commissions were being processed. Three requisitions for physicians were requested by DOD (300 for November 1950; 300 for December 1950; and 322 for January 1951) however no inductions were necessary since commissioning proceeded at a rate sufficient to meet the requirements.<sup>4</sup>

The Universal Military Training and Services Act of 1951 (UMT & SA) succeeded the Selective Service Act of 1948. The physicians amendment continued as a part of the new statute. The provisions affecting health care personnel were not again changed until 1957, when the special registration of

health care personnel was abandoned. Special provisions were made to provide for the call of physicians, dentists, and other health specialists who were registered and otherwise eligible for the regular draft. Health care professionals who had been deferred from conscription to continue their medical education incurred a liability for induction until age 35 unlike the general male population who were vulnerable to age 26.

It appeared, at the time, that the need within the Armed Forces for physicians and other health care providers, previously identified, could be met by Selected Service in the future through the supply of regular registrants in those professions. The data in table 1 on page 7 indicates that the decision was correct, and there were no calls from DOD for physicians for the next four fiscal years (1958-1961). The UMT and SA was extended in 1963 and again in 1967. During this period several changes in Selective Service operations were made by the Congress. The most significant changes were the introduction of random selection based upon a lottery; a uniform national call; a prime year of vulnerability for conscription; and the elimination of most deferments. It appears that these changes affected the ability to draft health care professionals since the deferment from the regular draft appears to be the key to insuring the availability of health care personnel to age 35. Under the aegis of the draft over 30,000 health care professionals were ordered for induction and of this number less than 70 refused the reserve commission and were actually drafted by 1973 when the law expired along with the regular peace time draft.<sup>5</sup> During this period the Selective Service issued 46 "special calls" for doctors and allied health specialists whose specialty and numbers are indicated below in table 2.<sup>6</sup>



**TABLE I -**  
**NUMBER OF PHYSICIANS REQUISITIONED FOR INDUCTION**  
**UNDER THE PROVISIONS OF THE UNIVERSAL MILITARY TRAINING**  
**AND SERVICE ACT, AS AMENDED FISCAL YEAR 1951**  
**THROUGH FISCAL YEAR 1969**

Induction Period			Special Requisition Numbers	Number of Physicians Requisitioned		Number of Physicians Requisitioned by Branch of Military Service		
Fiscal Year	Calendar Year	Month		Doctor of Medicine	Doctor of Osteopathy	Army	Navy	Air Force
1951	1950	November	a	300	.....	b	b	b
		December	a	300	.....	b	b	b
	1951	January	a	322 (922)	.....	b	b	b
1952	1951	July	1	717	.....	717	.....	.....
		August	a	333	.....	.....	.....	.....
		September	a	152 (1,202)	.....	.....	.....	.....
1953	1952	August	5	450	.....	100	.....	350
		September	6	355	.....	180	.....	175
		October	7	371	.....	196	.....	175
		November	8	341	.....	166	.....	175
		December	9	460	.....	285	.....	175
	1953	January	10	544	.....	344	.....	200
		February	11	537	.....	337	.....	200
		March	12	471	.....	271	.....	200
		April	13	700	.....	450	.....	250
		May	14	200	.....	200	.....	.....
		June	15	501 (4,930)	.....	501	.....	.....
1954	1953	July and August	16	542	.....	542	.....	.....
	1954	June	20	360 (902)	.....	.....	360	.....
1955	1954	July	21	120	.....	.....	120	.....
		August	22	850	.....	.....	350	500
		December	23	550	.....	100	250	200
	1955	March	24	1,275 (2,795)	.....	825	200	250
1956	1956	February	26	150	.....	150	.....	.....
1957	1956	July	27	580	.....	.....	380	.....
		October	28	300	.....	.....	300	.....
	1957	February	29	450 (1,130)	.....	250	.....	200
1958	.....	.....	.....	.....	.....	.....	.....	.....
1959	.....	.....	.....	.....	.....	.....	.....	.....
1960	.....	.....	.....	.....	.....	.....	.....	.....
1961	.....	.....	.....	.....	.....	.....	.....	.....
1962	1961	July	30	185	.....	.....	.....	185
		November	31	270	.....	165	105	.....
		December	31	275	.....	255	.....	20
	1962	January	31	100	.....	100	.....	.....
		January	32	145	.....	100	.....	45
		February	32	50 (1,025)	.....	.....	.....	50
1963	.....	.....	.....	.....	.....	.....	.....	.....
1964	1963	July	33	700	.....	700	.....	.....
		August	33	550 (1,250)	.....	.....	250	300
1965	1964	July	34	1,175	.....	650	325	200
1966	1965	July	36	1,085	.....	595	320	170
	1966	January	37	1,529 (2,614)	.....	949	260	320
1967	1966	July	39	1,715	.....	958	405	350
1968	1967	July through September	41	2,118	111	76	35	.....
1969	1968	July through December	42	1,070	56	1,461	657	.....
<b>TOTALS</b>				<b>22,996</b>	<b>167</b>	<b>12,749</b>	<b>4,317</b>	<b>4,690</b>

SOURCE: Office of the Director of Selective Service, Washington, D.C.

<sup>a</sup>These requisitions were filed through "volunteering" for commissions and without the formality of issuer calls to the State Headquarters and local boards of the System.

<sup>b</sup>Data not available.

<sup>c</sup>Minor numbers have been used to requisition other types of health manpower.

TABLE 2

SPECIAL CALLS FOR PHYSICIANS  
DENTISTS AND ALLIED SPECIALISTS  
1950-1973

<u>SPECIALITY</u>	<u>NUMBER CALLED</u>
Physicians	23,353
Osteopaths	257
Dentists	4,964
Veterinarians	285
Male Nurses	900
Optometrists	283
Podiatrists	<u>0</u>
TOTAL	30,042

In 1954 Dr. Frank Berry, the Assistant Secretary of Defense (Health and Medical), developed the Armed Forces Physicians Appointment and Residency Consideration Program, the so called "Berry Plan". The purpose of the plan was to provide specialists needed by the armed forces and to assist medical students in planning for their post internship years without the fear of a draft. The adoption of the plan provided to the student physician a chance to receive a Reserve Commission in the Medical Corps of the Military Service of his choice and establish a date mutually agreeable to that Service and the individual alike for his entry into active service. It was advantageous to

the physicians because it removed the uncertainty of the draft from his future and also to the Services which could eventually meet their requirements for specialists.

In 1972, the last year of conscription, the Berry Plan Information Bulletin listed 42 full deferment specialties available under the plan that year.<sup>7</sup> The Berry Plan appeared to have been effective for the DOD and popular with the physicians. The plan provided limited numbers of specialists for several years after 1972 because individuals completed deferments granted earlier and entered the Services.

The period from 1975 to the present has presented major challenges to the DOD. The number of medical speciality skills increased with the advancement of medical technology. The nation's need for war time service of health care personnel has not diminished but instead has risen as the strength of the reserve forces has dramatically decreased in size.

The Selective Service attempted to develop programs to meet the needs of DOD, however, these efforts ceased in 1976 when the service entered a deep standby status. During this period various legislative proposals were offered to provide for health care personnel including instant commissioning of health professionals when called to report for examination and induction. Most proposals, however, recognized that many of the specialties such as laboratory, x-ray, or pharmacy technicians would not be commissioned. It should be noted that none of the proposals were ever seriously debated by the Congress or the Administration.

The bi-annual mobilization exercises conducted by DOD in 1978, 1980, and 1982 have all identified the serious deficiencies in medical support in the event of a national emergency. For example, Dr. Jack Moxley, the former

Assistant Secretary of Defense for Health Affairs stated that "only one out of ten combat wounded would receive the surgical care he requires in a major conventional European conflict today".<sup>8</sup> Proud Saber, the 1982 exercise, assumed a requirement for various health care specialists such as surgeons, nurse anesthetists, and laboratory and x-ray technicians who may be needed within 10-15 days after mobilization. The DOD has charged Selective Service to be prepared to deliver the inductee within 13 days of mobilization. There is little doubt that they will be needed quickly, and that the services will need to have specialities beyond the seven occupational skills traditionally associated with the Doctors' Draft.

Over the last year or so, Selective Service, DOD, and the Federal Emergency Management Agency (FEMA) have worked together, at the staff level, preparing draft legislation to authorize the conscription of health care personnel in an emergency. This proposal would authorize the conscription of personnel in any field involving the provision of health care including females and individuals who would normally be classified in enlisted specialities. The proposal would authorize the President to require the registration of health care personnel in peace time. Presently the Emergency Mobilization Preparedness Board (EMPB) through its mobilization Working Group and the Health Working Group schedule periodical updates and reviews of the proposed legislation. The EMPB has authorized staffs of these groups to continue development, discuss proposals with interested professional groups and submit proposals for formal administrative review. To date none of the professional groups or associations contacted have produced organized support or opposition to the proposed amendment concerning health care providers to the Selective Service Act.

At a recent mobilization conference<sup>9</sup> some general figures were presented which partially represented the magnitude of the health care professional shortage problem. (See Appendix A) These figures are good indicators of the seriousness of the problem, but do not go far enough since they are limited to six categories - physicians, general surgeons, orthopedic surgeons, nurses, operating room nurses, and nurse anesthetists. What is significant within this limited presentation is that, in each case, the mobilization requirements exceed the number of assigned personnel within both the active and reserve forces. In a recent Army Times article,<sup>10</sup> LTC Thomas M. Chester, DOD's Director of Reserve Forces Medical Planning stated that during an intense conventional war, tens of thousands of casualties could occur during the first few weeks, and that most of these casualties could require surgical care soon after admission. Under the present force structure, war plans call for the Reserve Components to shoulder much of the burden of providing health care to sick and wounded soldiers according to Chester. He further stated that 70 percent of the Army's field hospitals and 90 percent of the Air Force aeromedical evacuation crews would be staffed by reservists or National Guardsmen.<sup>11</sup> The reserve medical units are not effectively staffed at present. For example the Reserves are 60 percent short of operating room nurses and 59 percent below their need for nurse anesthetists.<sup>12</sup> While joint efforts are in process to develop plans that could cut the shortages, the total reliance on voluntary programs to fill all shortages is tenuous at best.

While the Department of Defense and the Selective Service System personnel are preparing plans for a draft of medical professionals, reliance on the current draft mechanism will not provide all of the health care professionals

in a timely manner. The mission of the Selective Service System is two-fold. First, the System is dedicated to the goal of providing the untrained manpower needed to augment the All Volunteer Force should it be needed. Second, the system is required to protect individual rights through a fully developed system of due process.

In the event of a national emergency requiring the mobilization of the nation's manpower resources, the Selective Service System will begin the transition from its present posture to an active operational organization capable of fulfilling the wartime manpower requirement of the Department of Defense. The Reserve Forces of Selective Service will be immediately activated. A lottery will be conducted to assign Random Sequence Numbers (RSN), and an "order of call" will be established. The director of Selective Service, acting for the President, will administratively assign Class 1-A (available for induction) classification of registrants. Using the Selective Service master registration file, which will be assembled and maintained in RSN order, induction orders at the rate of approximately 35,000 per day will be transmitted to registrants as Western Union mailgrams. Each order will contain the following information:

- Identification of the registrant ordered for induction.
- Orders to report to a designated Military Entrance Processing Station (MEPS) at a specific date and time.
- Procedures to follow if unable to comply with the induction order.
- Exemption and deferment rights.
- The address of the registrant's local board/area office to which claims should be sent.

Concurrently, Selective Service Reserve Forces Officers will open 436 area offices at preselected recruiting office locations and establish 95 district appeal board offices. Fifteen hundred pre-trained recruiting personnel will temporarily transfer from the Armed Service Recruiting Commands to Selective Service to assist the officers assigned to the System's Reserve Forces. The area offices handle claims and support the local boards which decide the judgemental claims for postponement and administrative classifications or reclassification. Selective Service Reserve Forces Officers will also re-establish the state headquarters. State Directors will be activated and will perform an Inspector General (IG) function for the Director of Selective Service and will provide liaison with the Governor. The IG function will include the examination and approval of systems, procedures and records of Selective Service offices within the State. The six region offices will be expanded and will provide administrative and logistical support to the state headquarters, district appeal board offices and area offices, and supervise area office operations. In addition, the region offices will be responsible for providing a Selective Service MEPS Liaison Officer (MLO) to each of the MEPS in the region.

Upon receiving an induction order, a registrant may either report as ordered or apply for a postponement, deferment or exemption. Classification Information Booklets containing forms for filing claims as well as information and guidance on how to file and substantiate claims for reclassification will be available at each post office. Requests for deferment or exemption will be received routinely at the newly established area offices where compensated employees will process the administrative classification actions. Local boards consisting of five uncompensated civilian members each, will adjudicate

registrant claims for judgemental classifications: conscientious objector, hardship, clergy or ministerial student.

Streamlined Selective Service procedures will provide for the rapid reconstitution of the area offices and other elements of the field structure. Existing agreements with the Department of Defense and the Office of Personnel Management provide that at time of mobilization, Selective Service will be able to:

- Take over office space from the Armed Forces Recruiting Commands in order to open 436 area offices.

- Augment its staff with 1,500 trained recruiting command personnel familiar with basic Selective Service operations and procedures.

- Hire civilian personnel in grades GS-1 through GS-7 for area office staffing through a special appointment authority.

- Utilize Army computer terminals in Army Recruiting Offices appropriated for area office use.

- Be assured of adequate computer capability from the Joint Computer Center shared with the DOD Military Enlistment Processing Command (MEPCOM).

As developed by the Selective Service System, the mobilization timetable calls for registrants to receive induction orders from four through twelve days after the President asks Congress for induction authority (M-Day). Based on this timetable, it is estimated that the first inductees will report to Military Entrance Processing Stations (MEPS) at M + 13, and that the inductees will then report to military reception centers for processing and subsequent assignments to military training bases on M + 14.

The Selective Service System procedure, although rapid, does nothing to fill vacancies in reserve medical units with trained personnel at M Day. The



manpower provided through the Selective Service System are, for the most part, untrained and will be required to undergo basic training and, in the case of medical personnel, skill producing training. This training would be greatly curtailed in the case of civilian doctors, nurses and other health care professionals who would bring the required skills from their civilian status. However at the present time there is no mechanism for identifying the health care professional from the rest of the registrants until after induction. Because of this condition the so called "draft" of health care professionals is receiving considerable attention. However, the corrective action, in order to be effective, is not simply a matter of changing the law.

As is the case with any requirements problem, one first needs to know its magnitude. In this regard each of the Services must identify its total mobilization requirement for health care professionals by specific duty position or title (e.g. orthopedic surgeon, radiologist, laboratory technician, nurse anesthetist, etc.) for both enlisted and officer personnel. This total requirement would then be reduced by the number of personnel that are available in the active and reserve forces. The services have recently completed this process. Although still under review, the requirements shown in Appendix B represent the services' unofficial statement of net need by occupational skill in support of a worldwide scenario. The requirements are not all inclusive in that they are constrained by the field medical equipment assets that will be available to each of the services on 30 September 1983. The fact that these figures are not all inclusive should not overshadow the fact that each service was able to develop the figures and can expand the figures to the total unconstrained requirement upon request.

A second, and equally essential element in the process, is the complete identification of the manpower pool available within the civilian community. The need for this step is twofold. First, the requirement for health care is not unique to a wartime environment or to the military. Any attempt to withdraw health care professionals from the civilian community must be weighed in terms of its impact on that community. Second, any course of action selected by the Department of Defense and the Selective Service System would be influenced by the quantity, age and gender (as a minimum) of the available manpower pool. The identification process is presently under review within the federal government as it impacts on the development of plans for national disaster support. The Emergency Mobilization Preparedness Board has been charged with developing an inventory of health care professionals within the federal, state, local and private sector of the country. That such an effort is feasible is evidenced by two studies. One covered the registered nurse population (Appendix C) conducted in 1980 by the Research Triangle Institute under contract (HRA 231-80-0042) with the Bureau of Health Professions, U.S. Department of Health and Human Services, and the other study~~ies~~<sup>y</sup> covered physicians. The result of the latter study is contained in Appendix D. While it has been argued that the need to develop and maintain such an inventory is both expensive (projected cost of \$9 million<sup>13</sup>) and unnecessary for the preparation of national emergency preparedness plans, opposing arguments can be presented, at least from the Department of Defense standpoint, that any policy involving a draft or registration of health care personnel cannot be developed without some information concerning the available manpower pool. In

addition the projected cost suggests a level of sophistication that exceeds the requirement. In earlier years the federal government maintained a computer file on health professionals by obtaining the required data from secondary sources e.g. the American Medical Association, the Association of American Medical Colleges as well as professional associations for nurses, dentists, optometrists, veterinarians and medical technologists. Also since the information would be used to establish policy, and not as an alternative to a draft or even a registration, there is no need to update the data on an annual basis. The data could be updated every 3,5,7 years in conjunction with health care professional policy reviews. During the years between updates, estimates of future availability of manpower could be developed based on projected gains from training programs and losses from withdrawals, retirements, and deaths. While the federal government has not maintained its health care professional inventory, the professional organizations continue to maintain their inventories as an essential part of their operations, and the information could be obtained from these organizations by the government.

The current Military Selective Service Act has no provisions for any type of specialty draft. If the medical requirement is to be satisfied, a method for promptly responding to health care requirements is needed. In this regard, a draft bill (Appendix E) has already been prepared which, if approved, would amend the act to provide for the registration and induction of health care professionals as a special group. A copy of the current Military Selective Service Act with the draft bill inserted is Appendix F. As written the bill is broad enough to include personnel who would serve in both officer

and enlisted positions within the military. The bill further allows the President to prescribe the who, when and where of registration. These factors should be determined based on the demographics that are provided from the inventory data and would be subject to change based on the periodic updates to the data file. The bill further provides for a random selection process for the drafting of health care professionals as well as parallel provisions concerning penalties, deferments, exemptions, conscientious objectors and alternate service as is provided for non health care registrants. These provisions are essential from an equity standpoint. A further, and perhaps more controversial, issue is the inclusion of females. When thought of in terms of the country's philosophy concerning females serving in combat, the inclusion of females in this bill seems unwise. However, females have traditionally served as members of the health care delivery team in both peace and war. Further the preponderance of females in the nursing professions and the very significant shortage of nursing personnel within the military mandates the inclusion of females in the bill. In addition the military health care delivery team includes a significant number of enlisted positions. One of these is the aidman or hospital corpsman who provides the first echelon of combat casualty care often without direct physician supervision and who also works as part of the nursing service team within both permanent and field hospitals. Since there is no civilian equivalent for these skills, it would be expected that the pool of aidmen within the military would be used to fill the vacancies in units going to, or within, the theater of operations. The positions vacated as a result of this action would more

than likely be filled by civilian nursing personnel who are drafted into the service.

Since military positions, training requirements and working conditions may be similar in many respects with those in the civilian community, a process must be developed which will allow for the cross referencing of military and civilian health professional skills and occupations. This initiative is currently in process within the Office of Accession Policy, Office of the Secretary of Defense, Manpower, Reserve Affairs and Logistics. The effort, identified as Project Cross Code, will match military occupations by training requirements, working conditions, physical requirements, skill levels, etc. with the civilian health professional manpower pool. The first phase of this effort, which has a May 1983 completion date, is to create a tape which will cross reference the occupational code numbers developed by the Department of Labor from the Dictionary of Occupational Titles with the various occupational code numbers used by the service for all skills (not just medical) both officer and enlisted. The Department of Commerce also has an occupational coding system (Standard Occupational Classification (SOC)). The codes used by the Departments of Labor and Commerce can be cross referenced by computer at the present time. The matching of military occupation codes to these civilian codes will provide an essential step in the identification of civilian skills which are similar to military skills and provide the means by which civilian health care personnel can identify corresponding military occupations through the use of a number code. As an integral part of this effort, it is equally important that the services conduct a similar analysis of each service coding

system and establish the same cross reference between each service's occupation codes as is being done for the civilian codes. This effort will facilitate the cross leveling of manpower between services to insure that in the event of mobilization, the early deploying units are at full strength.

Another key element which will facilitate the mobilization process is the development of a table of skills substitutability. This table would provide a cross reference of alternate skills that could be applied to a manpower requirement, for example while there is not much demand for pediatricians in a theater during war, they can be used as general medical officers. A similar case might be made for substituting a pharmacy technician for a laboratory technician. The skills substitutability tables should be developed within the Department of Defense by the three services as a joint effort. The joint effort is essential to the development of a single table for use by the Selective Service System.

Finally, the re-establishment of an advisory committee for the selection of health care professionals is an essential element in the medical mobilization process. The objective of the Committee would be to provide professional advice to the Director of Selective Service with respect to the selection of needed health care professionals, paraprofessionals and ancillary categories of persons when such selection is required by the provisions of the Military Selective Service Act. The committee's activity would be national in scope.

The duty of the Committee would be to furnish advice to the Director of Selective Service as requested regarding the selection of registrants in

medical specialities. In the performance of its functions, the Committee would give appropriate consideration to the respective needs of the Armed Forces and of the civilian population for the services of medical, dental and allied specialist personnel available to serve the needs of any community. It would also be the duty of the Committee to make determinations with respect to persons in residency training programs who should be recommended for deferment for the purpose of completing such residency programs, if and when such deferments are authorized by law, and in making such determinations should give appropriate considerations to the respective needs of the Armed Forces and the civilian population.

Committees for Medical Personnel in time of war are not new. In June 1940 the American Medical Association in response to a request by the Surgeon General of the Army, created the "Committee on Medical Preparedness". Its objective was to maintain contact with appropriate government agencies. The committee took a survey of the medical profession by means of a questionnaire with the objective of determining:

- a. The number of physicians licensed to practice medicine.
- b. The number suitable (physically) for active service.
- c. The number and location of physicians qualified and available for the Armed Forces in case of emergency.
- d. The number available for service to the civilian population under emergency conditions.
- e. The availability and qualifications of those who could serve in special fields of medicine.

f. The number and identity of physicians qualified for teaching and research who were essential to the maintenance of educational institutions.

In April 1941, the Committee on Medical Preparedness of the AMA seeing "evidence of duplication of effort and of much confusion" submitted to its House of Delegates a recommendation that a central government authority be established for the allocation of physicians, dentists, and veterinarians between the Armed Forces and the civilian population. The House of Delegates passed a resolution urging that the United States Government establish immediately "a central authority with representatives of the civilian medical profession" to be known as the Procurement and Assignment (P and A) Agency for physicians.

The functions of the P and A Agency were:

(1) To receive from various governmental and other agencies requests for medical, dental, and veterinary personnel (and subsequently sanitary engineering and nursing personnel);

(2) To secure and maintain lists of professional personnel available, showing detailed qualifications of such personnel;

(3) To utilize all suitable means to stimulate voluntary enrollment, having due regard for the over-all health needs of the nation, including those of governmental agencies and civilian institutions.

The P and A Agency was the channel through which medical, dental, veterinary, sanitary engineering and nursing personnel were allocated to:

- (1) The Army, Navy, Air Corps and U.S. Public Health Service.
- (2) Non-military governmental departments.



- (3) Civilian and governmental hospitals.
- (4) Professional schools.
- (5) Industrial plants.
- (6) Civilian communities.

In order to accomplish these objectives, the P and A Agency:

Compiled and maintained in its State offices detailed information concerning the various professionals under its jurisdiction. This information was obtained through the cooperation of the National, State, and local professional societies.

Given the roles of committees from past years, the utility of these groups is clearly evident. The ability to maintain identification, location and availability of health care professionals is paramount for an effective mobilization plan. Additionally, recognizing the highly mobile society we have become since the end of World War II the problem of location and identification of specialists becomes further exacerbated. Accordingly the employment of a committee pursuant to the provisions of Section 9(c) of the Federal Advisory Committee Act, Public Law 92-463 (1973) becomes a high priority consideration in planning to provide for adequate health care issuances in the event of mobilization.

## CHAPTER III

### CONCLUSIONS

#### Conclusions

The existing registration requirement was reinstituted in July 1980. The law states...."the Congress further declares that in a free society the obligations and privileges of serving in the Armed Forces and the reserve components thereof should be shared generally, in accordance with a system of selection which is fair and just and which is consistent with the maintenance of an effective national economy". The law goes on to say that it shall be the duty of every male citizen of the United States and every other male person residing in the United States to register upon reaching his eighteenth birthday. Since that time over 7.8 million men have registered with Selective Service.<sup>14</sup> Compliance for the 1960-62 year of birth groups is over 94 percent and continues to increase as late registrations are added to the file.<sup>15</sup>

The law further states that any person who is in a medical, dental or allied specialist category not otherwise defined or exempted shall be liable for registration and training and service until their thirty-fifth birthday. However information on occupational skills is not currently maintained. Therefore the ability to identify, notify and induct health care professionals in a time frame that will satisfy mobilization needs is virtually impossible. The second most significant deficiency is the law's failure to address female personnel as well as all of the health care occupations normally filled by enlisted personnel. Another problem is the fact that<sup>b/</sup>using the current random process, the possibility of drawing the wrong mix of health care professionals is highly probable. Finally, the age limit may adversely affect the Selective Service System's ability to provide the services with the required skill

levels in many of the physician positions. Therefore, while the existing act creates the impression that health care professional requirements are included, the truth is that the act fails to meet service needs.

As discussed earlier in this report, the capability to separately register, select and call health care professionals for induction expired in 1973 and the Selective Service System has developed draft legislation to ameliorate this problem. The preparation of this legislation represents a significant milestone because, as a minimum, it modifies the current military Selective Service Act to include the specifics of calling health care professionals to active duty in support of mobilization. As written, the draft legislation can be included along with other provisions that would be enacted as law only in the event of mobilization. The inclusion of the draft legislation in the mobilization standby package could save up to two weeks in the mobilization of the health care professionals by simply eliminating the administrative processing time associated with the introduction of new legislation. While this limited action may be currently acceptable in view of the present administration's attitude toward readiness and the draft, it does not address the recognized need for health care professionals in the first ten days after mobilization. If, on the other hand, the need to further reduce the leadtime associated with the induction of health care professionals is accepted, the proposed amendment to the Military Selective Service Act (MSSA) could be enacted upon now to become part of the current act. The amendment continues to encourage the reliance on volunteers whenever possible, but provides the necessary authority to induct providers of health care for the

Armed Forces. The proposed legislation provides incentives for members of the health care occupations to volunteer rather than be inducted and perhaps serve in an enlisted status in their health occupational specialty.

The legislation, once enacted, gives the President broad powers to call for a wide spectrum of health care occupations and age ranges in a registration proclamation issued at mobilization or other national emergency. With the passage of the amendment, the authority for the President to provide for the classification, selection and induction (subject to appropriate congressional action) of eligible health care providers in an impartial manner by age, occupational category, or by specialty within the occupational category. It allows the President to delegate to the Director of Selective Service the authority to establish policy and regulations as well as rules and procedures to develop and conduct a procurement system for health care providers in response to DOD's call for such personnel. The amendment for the registration of health care personnel would be similar to the procedures for registration, classification, examination, induction, deferment and exemption, under the MSSA for regular personnel. What the enactment of the act will do is to recognize the uniqueness of the health professions; its problems, such as the older age of health care providers by the time they complete their professional training or the need to register women who make up the majority of nurses in the U.S. This legislation will provide the framework from which Selective Service can build the infrastructure necessary to provide health care providers to the DOD.

The capability to deliver health care personnel depends upon the level of preparation that precedes the decision to conscript. Without enacted legislation, even with a rapid M-day approval of the proposed legislation and subsequent preparation of registration materials, it is estimated that the first health care personnel would report for induction somewhere in the range of  $M + 70$  to  $M + 90$  days.<sup>16</sup> With the legislation enacted, service requirements determined by speciality, and the appropriate forms and materials prepared and in place, Selective Service could deliver health care providers in as little as  $M + 50$  to  $M + 60$  days.<sup>17</sup> This reduction in time, although significant, still fails to meet service needs.

Pre-mobilization registration is the most stringent of the four options discussed. This option requires health care professionals to register as such with the Selective Service System at the time they attain their "professional" status (e.g. completion of formal training, certification of skill level, licensure). The length of the registration period would be determined based on the manpower pool available to satisfy the stated service requirements. This course of action will allow for the quickest response to the services' requirements in time of mobilization. It has been estimated that this course of action could reduce response time to less than twenty days. This estimate is considered realistic when compared to the current published time frame for delivering the first registrant to the Military Entrance Processing Station (MEPS) at  $M + 13$  days under the current law. In addition the Director, Selective Service System stated that six to eight weeks could be saved using pre-mobilization registration.<sup>18</sup> The most significant problem with this

option is the fact that registration for many of the health care skills (especially physicians) will extend well beyond the current twenty-sixth or thirty-fifth year of age since the time required to obtain required specialty skills will carry some health care personnel through the upper age limit. Such a requirement places an undue burden on some of the health care personnel. However it is suggested that the proposed amendment of the military Selective Service Act anticipates a different requirement for health care personnel than for others by allowing the President to determine the upper age limit of those subject to the provisions of the act. It should also be remembered that pre-registration generates no military service obligation without a national mobilization. To ensure, however, that the concept of equitable treatment for all is maintained, the use of some special considerations for special cases are advisable. These can include such simple things as deferment from induction during the time the individual is in training to the more sophisticated system of providing some type of income tax credit for each year that an individual remains registered beyond age twenty-six (for most health care professionals) or thirty-five (for specialists). A further equity consideration centers around the length of the registration period. While this period will be determined by requirements and the manpower available to meet the requirements it is essential that it be a standard time period for each profession e.g. - all enlisted personnel, all nurses, all physicians, all dentists, etc. will each have stipulated registration period and will each receive the same types of special consideration if applicable.

In addition to being the most stringent requirement, pre-mobilization registration is also the most unpopular one. However if one assumes that there will be very little warning time before the outbreak of hostilities, or that, even with warning, there will be very little time between M Day and D Day, there is no other feasible alternative to insuring that health care personnel are available to meet M Day requirements. The next best alternative will add approximately six weeks to the processing time. This additional time frame fails to meet unit deployment schedules and will significantly affect the health care delivery system in the initial phase of combat. The effort to be put forth to pass even standby legislation will be significant and will cause considerable unrest both in Congress and in the country. Unfortunately it will provide little, if any, solution to the problem. If there is sufficient support to pass the Health Personnel Mobilization Act which does not, by itself, create a solution to the problem, the logical course of action is to go one step further and use the Selective Service System apparatus to identify health care personnel and maintain a current register of these personnel for selection purposes at the call of the President.

CHAPTER IV  
RECOMMENDATIONS

Recommendations

To insure that sufficient health care personnel are available to support the committed force in the event of mobilization, some type of a draft will have to be initiated. The Selective Service System can respond to Service requirements only if a pre-registered manpower pool is available at M Day. This can be accomplished through a modification to the existing Military Selective Service Act. The need for such an action can be demonstrated provided that the following essential elements are integrated into the defense of such an action:

1. A consolidated unconstrained Department of Defense statement of requirements by specialty.
2. An identification of the manpower pool available within the civilian community.
3. A mechanism for cross referencing civilian skills to military skills and military skills of one service with those of the other services.
4. A mechanism for substituting one civilian/military skill for another.

Because of the controversial nature of this action, it is essential that the above elements be completed, and a realistic statement of need be developed that identifies the absolute minimum number of health care personnel that must be registered to meet service requirements at M Day. While the



action to amend the Military Selective Service Act rests with the Selective Service System, the analysis of the data and the development and periodic update of policy concerning the who, when, where and how long of registration must be accomplished by a working group consisting of representatives from the office of the Assistant Secretary of Defense, Health Affairs, the office of each of the Surgeons General, members of the Advisory Committee and representatives from the National Headquarters, Selective Service System.

It is the conclusion of the authors that the recommendations provided above are valid, and that implementation of the recommended actions will ensure that the required medical manpower is available to satisfy service requirements.

**APPENDIXES**

**APPENDIX A**

**DOD Health Care Personnel Requirements  
Worldwide Scenario  
General**

**APPENDIX B**

**DOD Health Care Personnel Requirements  
Worldwide Scenario  
Specific**

**APPENDIX C**

**The Registered Nurse Population  
An Overview  
November 1980**

**APPENDIX D**

**The Physician Population  
By Employment and Specialty  
Source: Howard V. Standler  
Director of Health Analysis, Health and Human Services**

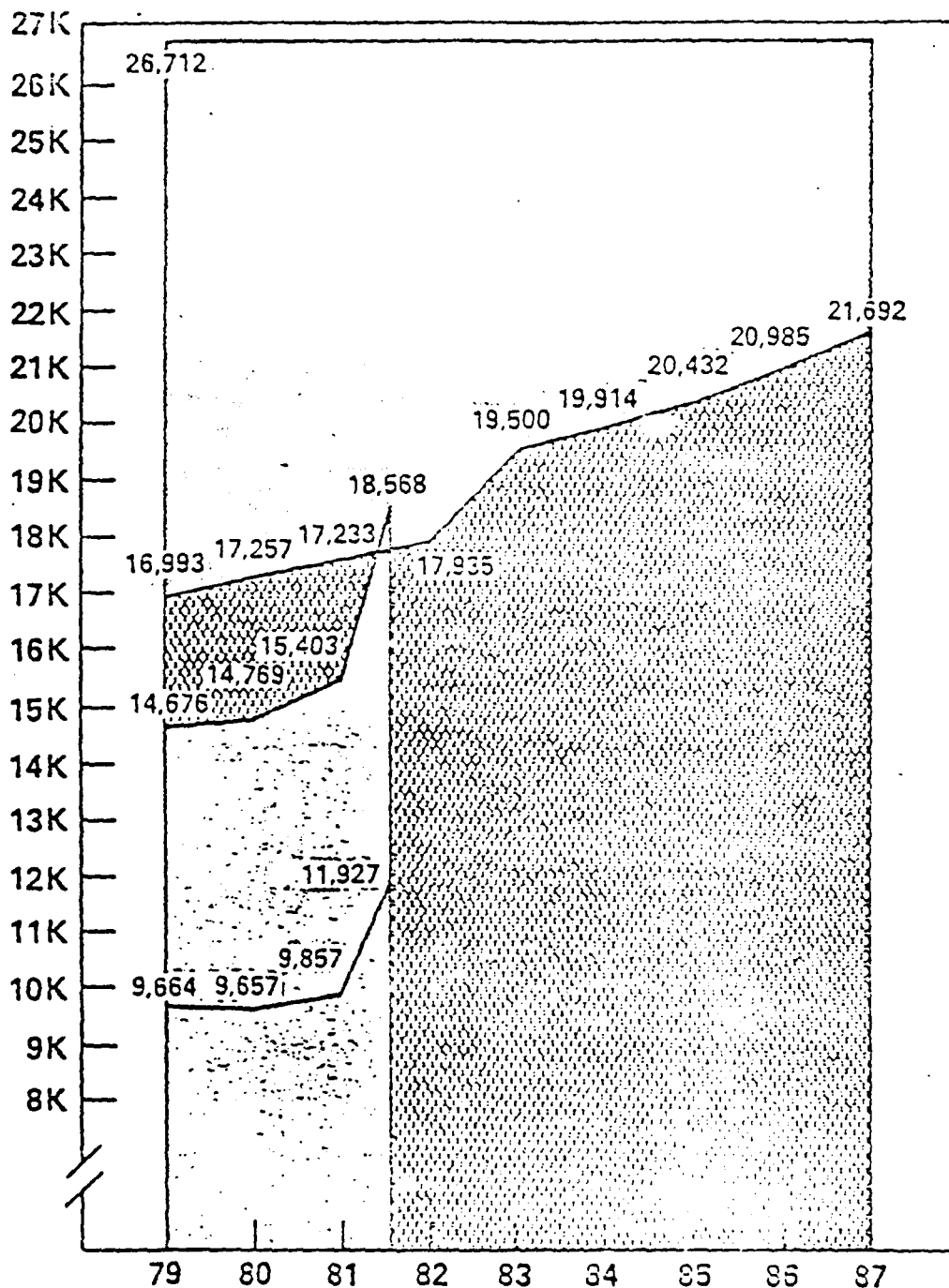
**APPENDIX E**

**Amendment to Military Selective Service Act  
(Draft)**

**APPENDIX F**

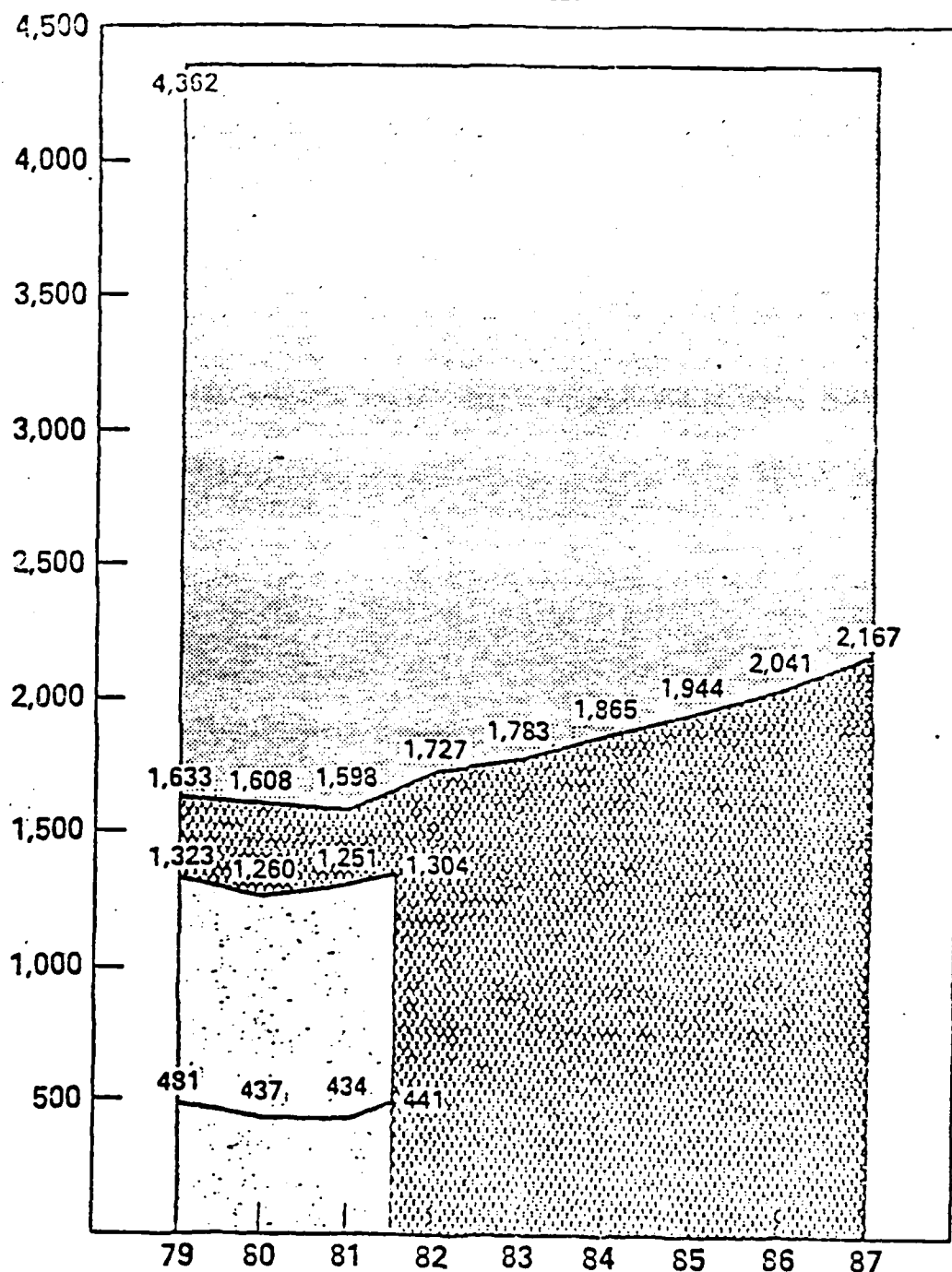
**Military Selective Service Act  
As Amended By  
Draft Bill on Health Care Personnel**

# DoD PHYSICIANS



REQUIREMENTS      RESERVE ASSIGNED      *Active*  
 AUTHORIZED STRENGTH      ACTIVE DUTY ASSIGNED      *Duty*

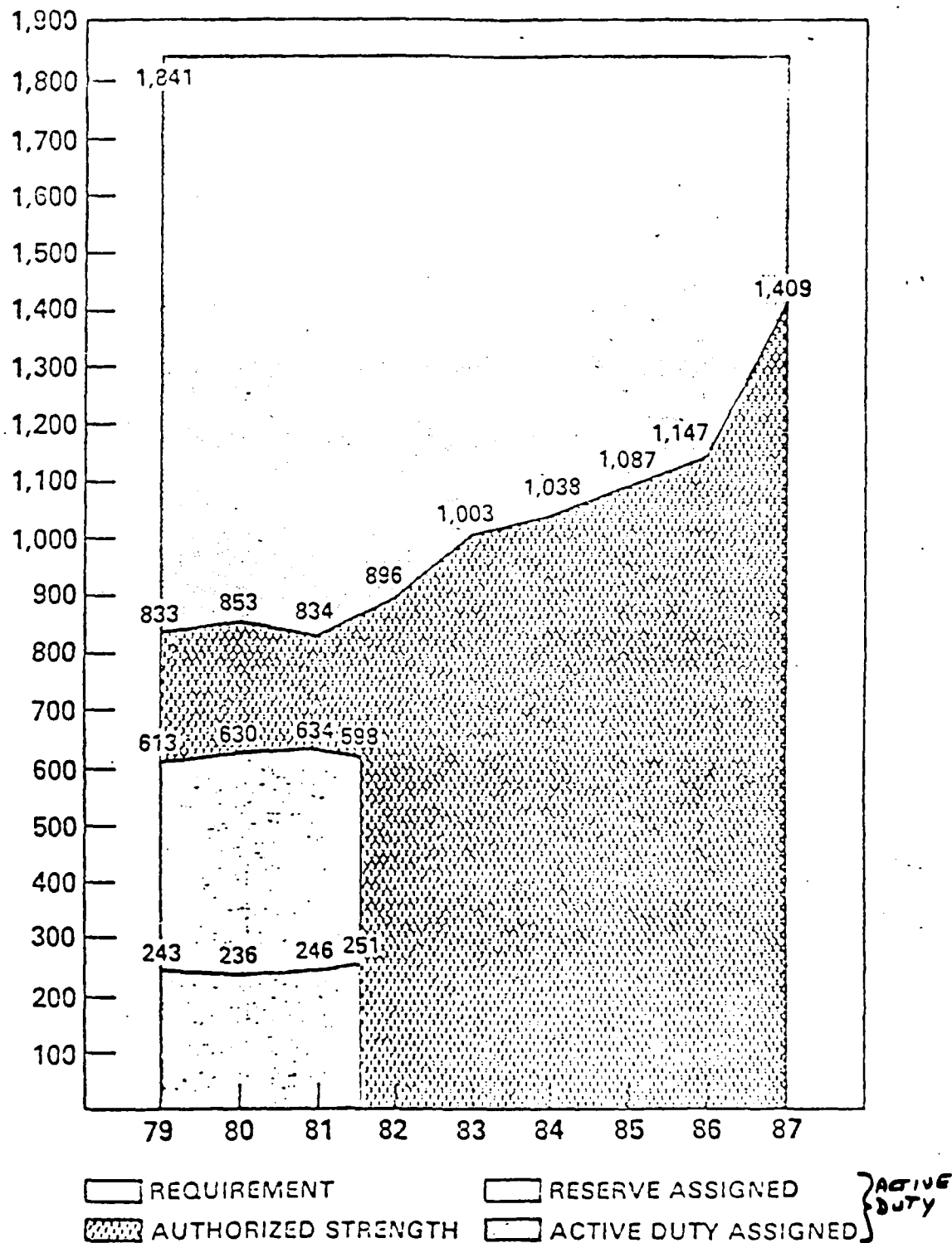
# DoD GENERAL SURGEON



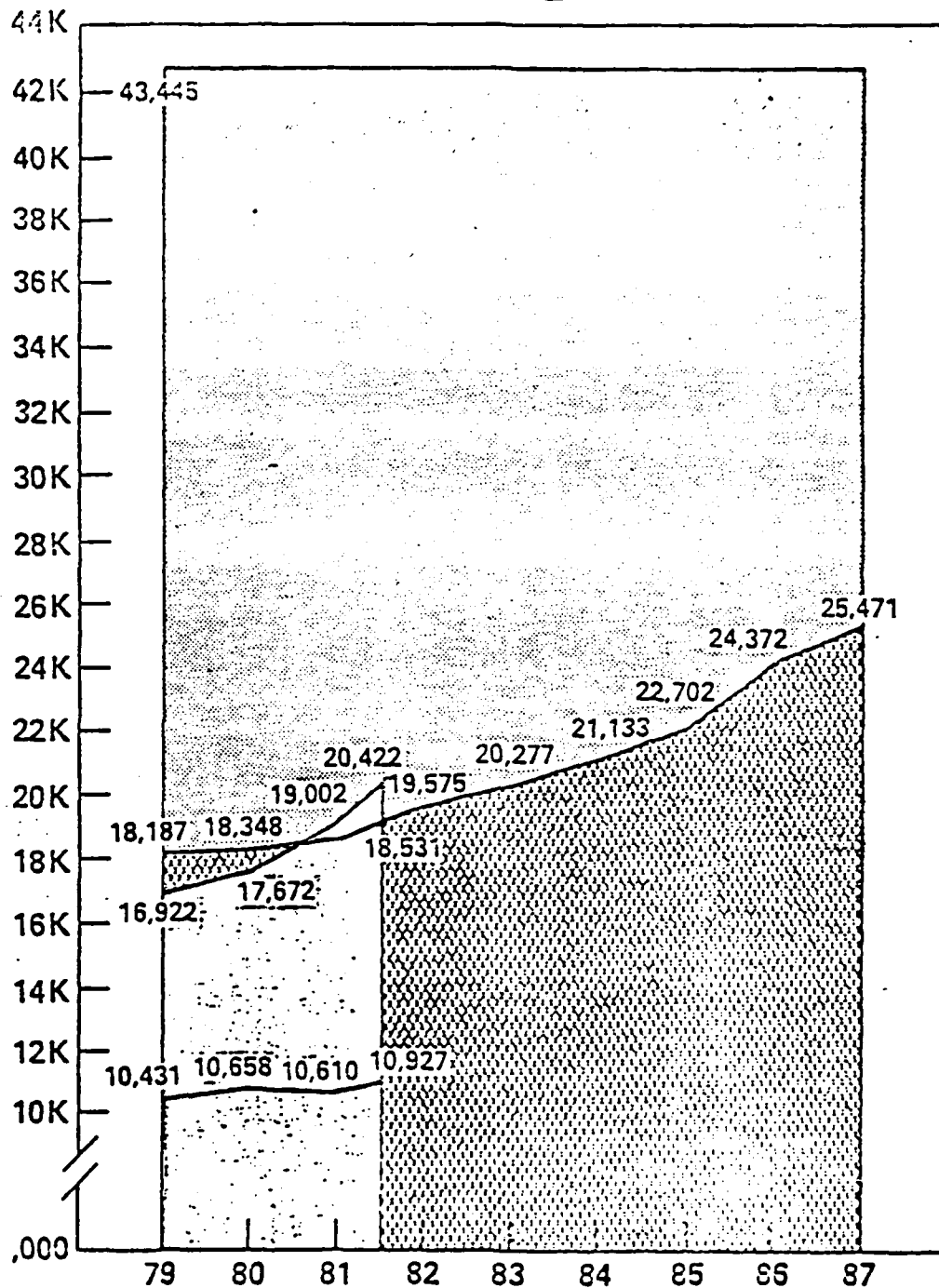
REQUIREMENTS  
 RESERVE ASSIGNED  
 AUTHORIZED STRENGTH  
 ACTIVE DUTY ASSIGNED

Active Duty

# DoD ORTHOPEDIC SURGEON



# DOD NURSES



□ REQUIREMENT

□ RESERVE ASSIGNED

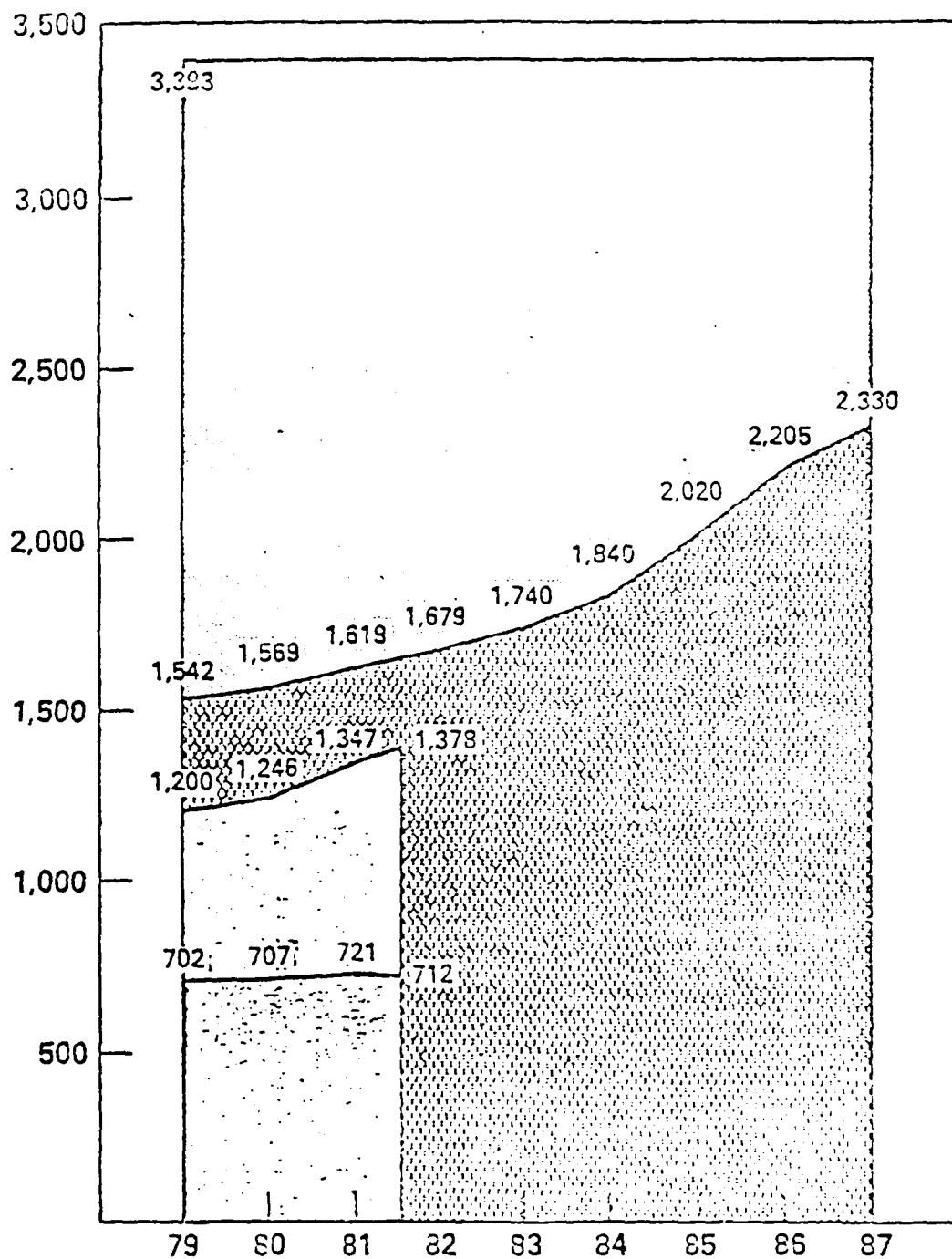
▨ AUTHORIZED STRENGTH

□ ACTIVE DUTY ASSIGNED

} ACTIVE DUTY

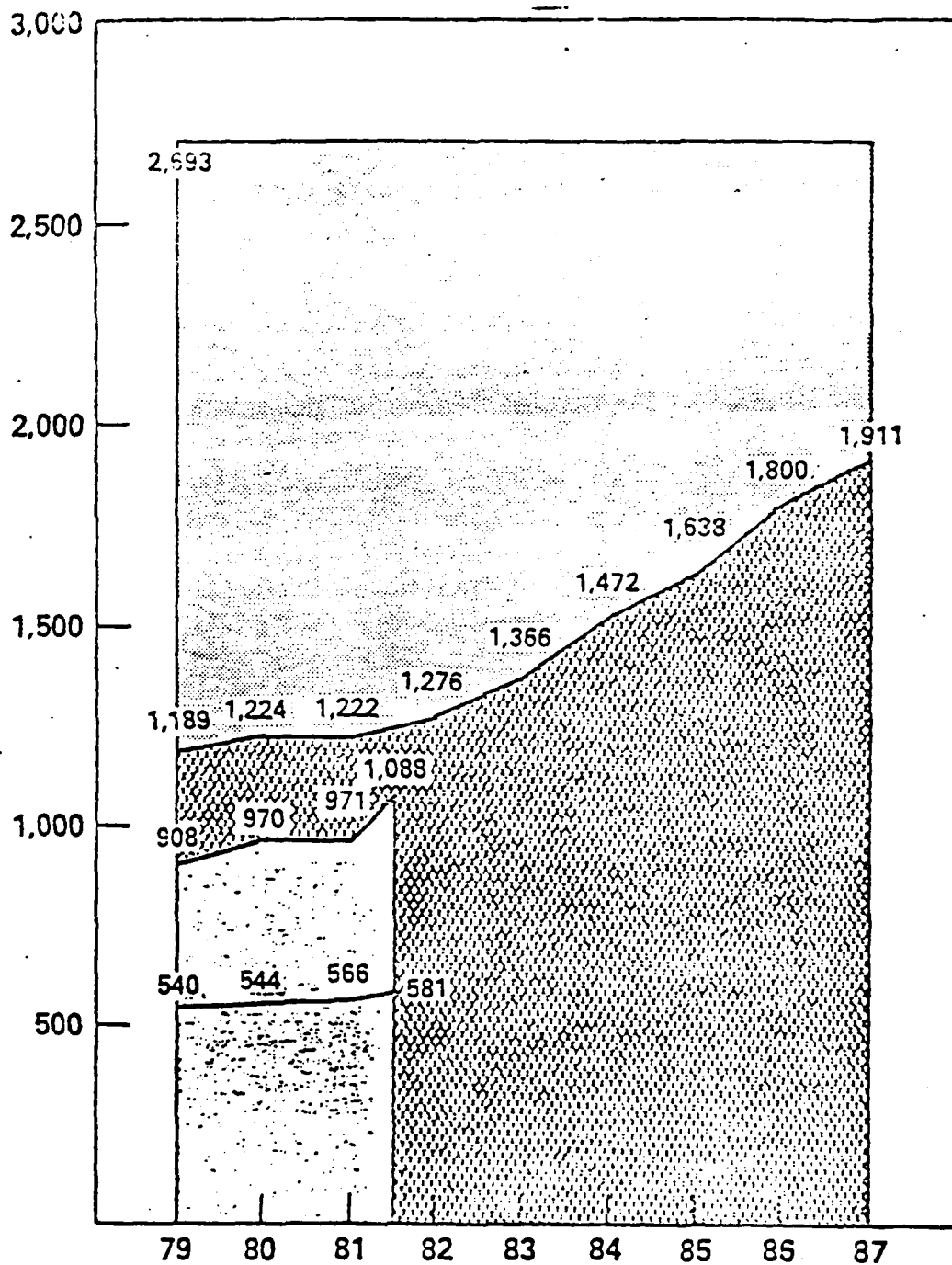
4-702

# DoD OPERATING ROOM NURSES



REQUIREMENT	RESERVE ASSIGNED	} <i>ACTIVE DUTY</i>
AUTHORIZED STRENGTH	ACTIVE DUTY ASSIGNED	

# DOD NURSE ANESTHETIST



REQUIREMENT      RESERVE ASSIGNED  
 AUTHORIZED STRENGTH      ACTIVE DUTY ASSIGNED

ACTIVE DUTY



<u>PHYSICIANS</u>	4487
General Surgeon	1904
Anesthesiologist	200
Internal Medicine	134
Thoracic Surgeon	54
Vascular Surgeon	12
Neurosurgeon	103
Plastic Surgeon	13
Urologist	32
Ear, Nose, Throat	32
Orthopedic Surgeon	1927
Occupational Medicine	6
Pulmonary Disease Medicine	7
Gastroenterologist	15
Cardiologist	13
Allergist/Clinical Immunologist	10
Psychiatrist	8
Clinical Pharmacologist	17
<u>NURSES</u>	
Clinical Nurse	1238
Medical Surgical Nurse	2531
Nurse Anesthetist	590
Operating Room Nurse	632
Mental Health Nurse	449
<u>DENTISTS</u>	
General Dental Officer	161
<u>VETERINARIANS</u>	
Veterinary Laboratory Animal Officer	7
Veterinary Pathologist	1
Veterinary Microbiologist	5
Veterinary Comparative Officer	16
<u>ENLISTED PERSONNEL</u>	
Hospital Corpsman	5313
Operating Room Technician	2442
Medical Specialist	15,395
Laboratory Technician	1599
Radiology Technician	662
Pharmacy Technician	609
Dental Specialist	880
Respiratory Specialist	506
Psychiatric Specialist	248
Orthopedic Specialist	379
Orthotic Specialist	35
Physical Therapist	200
Occupational Therapist	141
Environmental Health Specialist	7

ENLISTED PERSONNEL

Medical Supply Specialist	503
Biomedical Equip. Repair Technician	235
Optical Laboratory Technician	88
Patient Administration Specialist	135
Hospital Food Service Specialist	12

OTHER COMMISSIONED PERSONNEL

Occupational Therapist	4
Physical Therapist	2
Hospital Dietician	26
Nuclear Medicine Service Officer	3
Entomologist	7
Physiologist	3
Podiatrist	17
Psychologist	6
Physician Assistant (Warrant Officer)	32

**DIVISION OF HEALTH PROFESSIONS ANALYSIS**  
BUREAU OF HEALTH PROFESSIONS

THE REGISTERED NURSE POPULATION,  
AN OVERVIEW  
From  
National Sample Survey of  
Registered Nurses,  
November 1980

U.S. Department of Health and Human Services  
Public Health Service  
Health Resources Administration  
Bureau of Health Professions  
Division of Health Professions Analysis  
Report No. 82-5

## Preface

In 1975, the Bureau of Health Professions undertook the development of a major new survey design to study the number and characteristics of the registered nurse population. In 1977, the American Nurses' Association, under contract to the Division of Nursing of the Bureau of Health Professions (Contract No. HRA 231-76-0085) initiated the new design by surveying a sample of registered nurses in September of that year. In November 1980, Research Triangle Institute, through a contract with the Division of Health Professions Analysis of the Bureau of Health Professions (Contract No. HRA 231-80-0042) conducted the second study in the series. This report presents a summary of selected findings from that study.

The data collected in the 1980 study are extraordinarily comprehensive as well as detailed and touch on a multitude of the issues related to nursing, particularly those involved in ensuring that there are sufficient and adequately qualified registered nurses to care for the needs of the population. Analysis of data from a comprehensive survey, such as this one, requires time to sift through its many aspects. However, the high interest in and importance of the findings of this survey prompted the Division of Health Professions Analysis to prepare this brief overview of selected data which could be made available in a timely manner. Subsequent findings and reports will be released as additional study and refinement are made of the data.

This preliminary report was prepared by Evelyn B. Moses, Acting Chief, Data Collection and Analysis Branch. She was assisted by William E. Spencer, Statistician, and Rosalyn Roman, Statistical Assistant. Selma L. Warsaw provided the typing assistance.

Howard V. Stambler  
Director  
Division of Health Professions Analysis

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## THE REGISTERED NURSE POPULATION, AN OVERVIEW

### Scope of the Study

Registered nurses constitute the largest group of licensed health professionals in the country. They function in all parts of the health delivery system at many different position levels. The educational system which prepares them to practice is multi-faceted consisting of several different modes of basic preparation and several levels of post-R.N. education. Not all in the registered nurse population are employed in nursing at any given time and a number of those employed practice on a part-time rather than full-time basis. To properly assess the dynamics of the role that registered nurses play in the health care system and the appropriate coverage from registered nurses, a regular monitoring system is needed to evaluate developments in the registered nurse resources.

To accomplish this monitoring system the design for sample surveys of registered nurses in the country was developed. The design was developed to provide data on basic characteristics of the registered nurse population along with providing in-depth data on various issues of particular importance to an understanding of the registered nurse population. The November 1980 survey whose results are presented here was the second of those to be carried out using this design. A review of the questionnaire included as an appendix to this report will show the many different subjects and aspects about registered nurses of current concern which are covered in the present survey.

All the data resulting from the study has not yet been completely summarized. The intention of this report is to provide a brief summary of the basic characteristics of the registered nurse population in the country as a whole. The data selected for this initial analysis were those most needed to up-date the information on the aspects about the registered nurse population which are helpful to an assessment of the national supply.

Information is provided here on the sex composition, marital status, age distribution, and racial/ethnic background of the registered nurse population and the relationship of these personal characteristics to the working status of the nurse. Covered in the data as well is a detailed description of the educational background of the registered nurse population: from the basic education they received to become registered nurses to the more specialized training some nurses have to carry out their particular positions. For those who are employed in nursing, information is provided on their distribution by the type of setting in which they work, the position and functions they perform, the hours worked and their average earnings.

Thus, in the summary highlights and the 16 tables, an attempt is made to provide an overview of those characteristics which are traditionally considered when a description is provided of the registered nurse population.



Included as well is some brief information on the new, emerging roles of registered nurses. While these data will serve to update the information on the personal and professional characteristics of registered nurses, there are a number of important subjects necessary to an appropriate evaluation of the registered nurse supply today which are not covered in this review. Many of these subjects, such as geographic distribution and data on mobility, as well as the interrelation of all these characteristics, can be derived from the full study. The report of the study, prepared by Research Triangle Institute, will cover a number of these areas. That report, entitled National Sample Survey of Registered Nurses II, Status of Nurses: November 1980, will be available shortly from the National Technical Information Service. In addition, The Division of Health Professions Analysis is planning to make special releases of future other analyses of the survey data. 1/

### Summary Highlights of Findings

#### Demographic Characteristics of The Registered Nurse Population

It was estimated that as of November 1980, there were 1,615,846 individuals located in the United States who had current licenses to practice as registered nurses. 2/ Most of these were women. However, it was estimated that about 2.7 percent, or 43,237, were men. Most were white, but it was estimated that 7 percent, almost 114,000, were from racial/ethnic minority backgrounds. More than half of the registered nurses were under the age of 40; the median age of the registered nurse population was 38.4 years.

The overwhelming majority of the registered nurses were married, 70.8 percent. In fact, almost half of all the 1.6 million nurses were married with children in the home. Almost 15 percent were never married and about 14 percent were widowed, divorced, or separated.

Among all the R.N.'s in November 1980, about two-thirds had obtained their basic nursing education in a diploma program; 18 percent in an associate degree program and 17 percent in a baccalaureate program. When all the formal education related to nursing was taken into account, both basic and that which was received after the nurses had obtained their R.N. license, it was estimated that about 18 percent of the nurses had associate degrees; almost 55 percent, diplomas; and 22 percent, baccalaureates. Another 5 percent had master's or doctoral degrees. About a third of those whose highest advanced

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- 1/ An advance report was issued from a chapter prepared for the American Academy of Nursing for publication in Linda A. Aiken, Ph.D., Editor, Nursing in the 1980's: Crises, Opportunities, Challenges, Forthcoming March 1982, entitled "A Statistical Profile of Registered Nurses in the United States, 1977-1980" (DHPA Report No. 82-3).
  - 2/ There was a total of 1,624,011 individuals with current licenses to practice as of November 1980, 8,165 of these were located outside of the 50 States and the District of Columbia. The data in the report relate only to those located in the United States.

degree was either a master's or doctorate had majored in education. For 17 percent of them the advanced degree focus was on supervision or administration, and for 42 percent, on clinical practice.

#### Employment Status

There were 1,235,152 registered nurses who were employed in nursing; 76.4 percent of the 1.6 million with current licenses to practice. The men had higher activity rates than the women; 86 percent compared to 76 percent. R.N.'s from minority groups were more likely to be employed than were the nonminority nurses; 88 percent compared to 76 percent. Thus, among the R.N.'s employed in nursing, an estimated 8.1 percent were from minority racial/ethnic backgrounds.

Registered nurses who were employed in nursing tended to be younger than those who were not. The median age of the employed nurses was 36.3 years. For those who were not employed in nursing, the median was 47.1 years. A larger proportion of those who were not employed in nursing were married than of those who were employed, 80 percent compared to 68 percent.

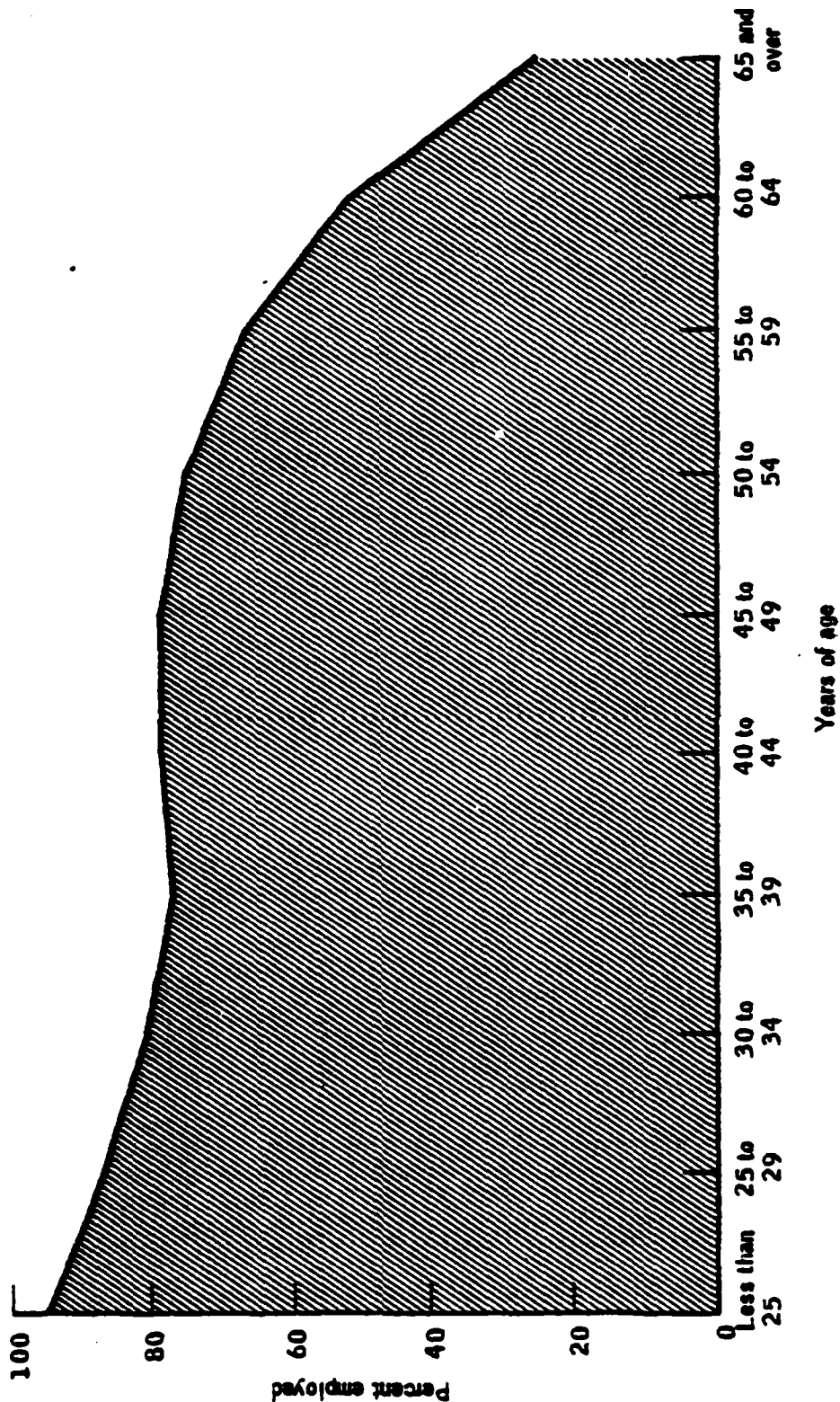
Almost a third of the R.N.'s employed in nursing, 32 percent, were employed on a part-time basis. The 395,615 part-timers represented almost a quarter of the 1.6 million registered nurses in the country. Part-timers were far more prevalent among the married nurses than among those who were never married or were formerly married. They were particularly numerous among the married nurses with young children (less than 6 years old). More than half of all married registered nurses with young children were employed in nursing on a part-time basis.

#### The Employed Registered Nurses

Since registered nurses are employed in many different areas of the health delivery system a review of the employed nurse should consider the setting in which they are employed, the type of position and the functions performed. The overwhelming majority of them work in hospitals and in staff-level positions. Almost two-thirds, or 810,851, of the 1,235,152 employed registered nurses were working in hospitals. An estimated 800,368 nurses, or 65 percent of the 1.2 million employed had position titles in their primary positions which could be considered staff nurse positions. In addition to these, there were about 57,000 nurses who were in specialized positions predominantly geared toward patient care. These included an estimated 18,465 clinical nursing specialists, 16,212 nurse midwives/practitioners, 14,168 nurse anesthetists and 7,840 nurse clinicians. Given this position distribution, it is not surprising that 64 percent of the 1.2 million employed nurses were estimated to spend at least half their time during a regular work week in direct patient care. An estimated 46 percent of the 1.2 million spent at least three-quarters of their time in direct patient care.

About 11 percent, or 135,000 of those employed in nursing were estimated to hold more than one position in nursing. The type of work performed in what they considered their secondary position(s) was varied. However, a number of

CHART 1  
 PERCENT OF REGISTERED NURSES EMPLOYED IN NURSING, BY AGE GROUP  
 November, 1980



459-C

these nurses were estimated to be working through Temporary Employment Services. Taking these secondary positions into account along with the employers identified for the nurses' principal positions, it was estimated that 37,162 registered nurses were working through Temporary Employment Services in November 1980. For about half these nurses, 49 percent, the work received through the Temporary Employment Service was their principal nursing position.

While almost a third of all employed nurses worked on a part-time basis, the ratio of full to part-timers varied according to the field of employment. Thus, it was estimated that about 46 percent of the nurses employed in nursing homes and 43 percent in physician/dentist offices were part-timers. On the other hand, only 15 percent of the occupational health nurses and 20 percent of those in public/community health settings were part-timers. Considering all employed nurses working full-time, the average annual hours worked (including paid vacation, etc.) was 2,031. For the part-timers, it was 1,037, 51 percent of the average full-time hours.

Differences among employed nurses are noted according to educational background, as well. Thus, nurses in higher level and teaching positions were more likely to have advanced education. About 20 percent of the nurses in administrative positions and 40 percent of those in instructor type positions had master's or doctorates. Among the clinical nursing specialists, it was estimated that about 27 percent had at least a master's degree, and for nurse clinicians, 15 percent had at least a master's degree.

Among the nurse midwives/practitioners, more than three-quarters had no more than a baccalaureate degree. However 78 percent had received formal nurse practitioner training, most of them in programs leading to a certificate. Among those who had formal nurse practitioner training, about 29 percent studied in family nurse practitioner programs, 20 percent in pediatric nurse practitioner programs, and 16 percent in adult nurse practitioner programs.

#### Average Annual Earnings

The average annual earnings of the registered nurses employed on a full-time basis in November 1980 were \$17,393. The earnings varied according to the field of employment and type of position. The lowest average earnings were found for the staff nurses in physician/dentist offices, \$11,938. General duty/staff nurses in hospitals averaged \$16,451 while those in hospital administrative positions averaged \$24,620.

#### The Registered Nurses Not Employed in Nursing

Of the 379,712 individuals who had current licenses to practice in November 1980, but were not employed in nursing, 31,652, or 8 percent, were actively seeking nursing employment. These 31,652 nurses represented 2 percent of the 1.6 million registered nurses. More than two-thirds of those looking for nursing employment were seeking part-time jobs. The majority of those actively seeking nursing jobs had been looking for no more than four weeks.

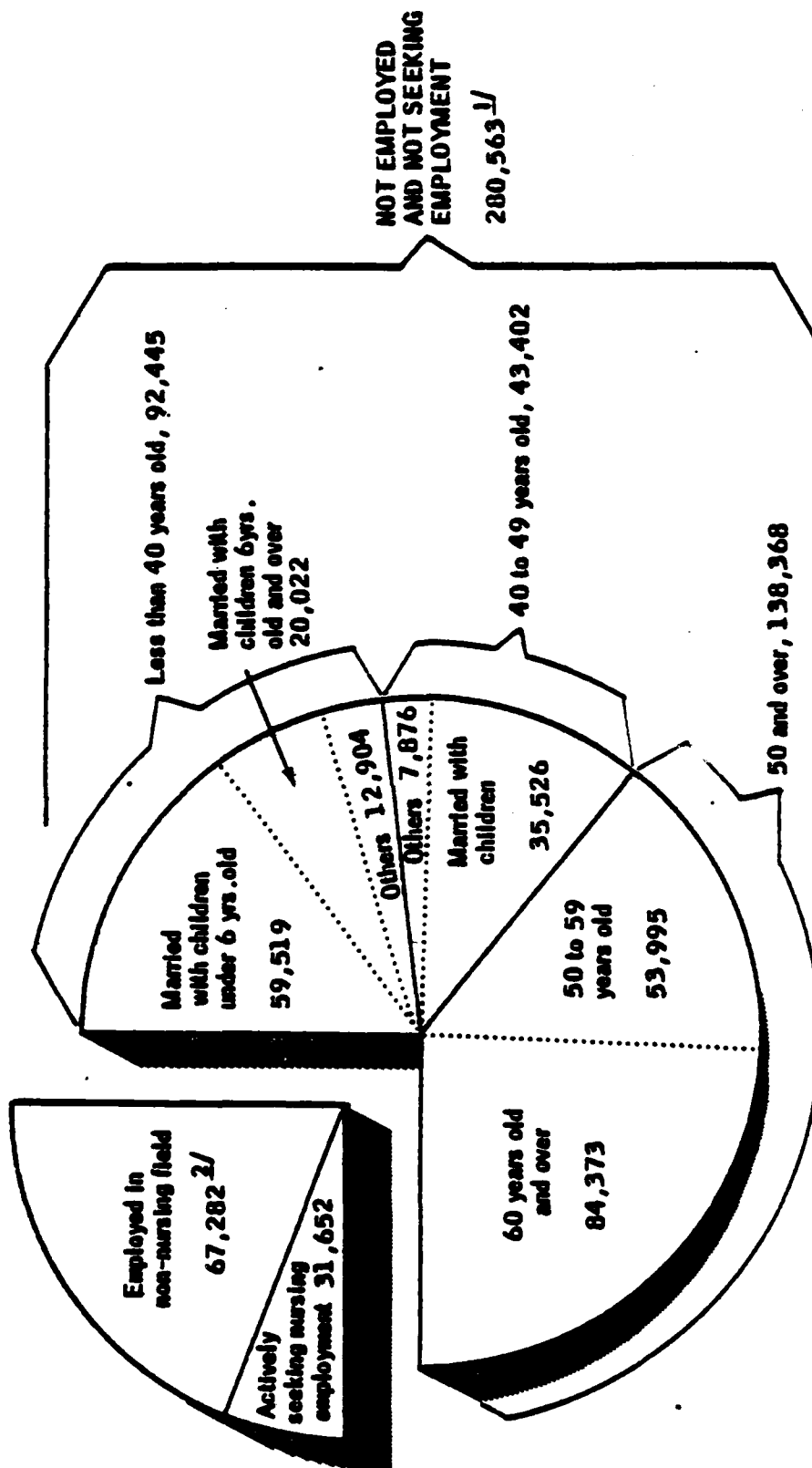
An estimated 73,934 registered nurses were employed in non-nursing occupations. Of these, 6,436 were also included in the group seeking nursing employment. Approximately 32 percent of those in non-nursing occupations were in health-related occupations. Almost 40 percent of the non-nursing workers were employed part-time, most of these in non-health related occupations.

Apart from those who were seeking nursing employment or were employed in a non-nursing capacity, there were an estimated 280,563 inactive registered nurses. Most of these, 80.6 percent, were married, and most of the married inactive nurses had children at home. In total, of the 280,563 inactive nurses, about half (139,000) were married with children in the home. Of the remaining inactive nurses, who were either not married or did not have children, approximately 115,000 were at least 50 years old. Thus, at most, about 26,000 of these inactive nurses were under the age of 50 and were not married with children at home.

CHART 2

CHARACTERISTICS OF REGISTERED NURSES NOT EMPLOYED IN NURSING  
November 1980

N=379,712



1/ Includes all those not employed in nursing who did not indicate they were seeking employment or that they were employed in a field other than nursing.

2/ Excludes any who might be employed in a non-nursing field, but are actively seeking nursing employment.

APPENDIX A  
Detailed Tables

Table 1. Registered nurse population, by sex, racial/ethnic background, and age group: November 1990

Sex, racial/ethnic and age group	Totals 1/				Employed in nursing				Not employed in nursing			
	Number		Estimated		Number		Estimated		Number		Estimated	
	In Sample	Percent	Number	Percent	In Sample	Percent	Number	Percent	In Sample	Percent	Number	Percent
<b>Sex</b>												
Total.....	30,436	100.0	1,016,646	100.0	23,602	100.0	1,236,152	100.0	6,812	100.0	379,712	100.0
Male.....	625	2.1	43,237	4.3	717	3.0	37,136	3.0	108	1.6	6,101	1.6
Female.....	29,334	96.9	1,558,830	96.9	22,681	96.9	1,187,643	96.9	6,646	97.7	370,822	97.7
Not known.....	277	.8	13,777	.8	204	.8	10,333	.8	59	.7	2,789	.7
<b>Racial/ethnic background</b>												
Total.....	28,073	100.0	1,401,836	100.0	21,603	100.0	1,119,541	100.0	6,463	100.0	362,019	100.0
White (non-Hispanic).....	907	3.2	87,592	6.2	814	3.8	81,878	7.3	92	1.4	8,809	2.4
Black (non-Hispanic).....	576	2.1	31,796	2.3	496	2.3	28,790	2.6	81	1.2	3,005	.8
Asian/Pacific Islander.....	88	.3	4,133	.3	65	.3	3,031	.3	23	.3	1,102	.3
American Indian/Alaskan Native	294	1.0	20,043	1.4	326	1.5	17,136	1.5	17	.2	2,907	.8
Hispanic.....	408	1.4	20,446	1.5	300	1.4	14,976	1.3	94	1.4	4,708	1.3
Not known.....												
<b>Age group</b>												
Total.....	2,346	100.0	124,507	100.0	2,277	100.0	118,609	100.0	118	100.0	5,918	100.0
Less than 25.....	5,685	24.2	281,099	22.6	4,857	21.3	246,254	20.8	726	6.1	34,768	5.9
25-34.....	4,708	20.1	248,600	20.0	3,826	16.8	200,406	16.9	886	7.5	48,193	8.1
35-44.....	3,778	16.1	199,323	16.0	2,962	13.0	163,682	13.8	816	6.9	48,597	8.2
45-54.....	3,224	13.7	175,431	14.1	2,536	11.2	137,330	11.6	698	6.0	38,101	6.4
55-64.....	2,756	11.8	146,039	11.7	2,186	9.6	119,169	10.1	601	5.1	31,870	5.4
65-74.....	2,479	10.6	133,896	10.7	1,862	8.2	100,717	8.5	597	5.1	33,178	5.7
75-84.....	2,257	9.6	121,311	9.7	1,549	6.8	80,410	6.8	707	6.0	40,852	6.9
85 and over.....	1,424	6.1	79,139	6.3	757	3.3	40,836	3.4	665	5.7	38,429	6.5
Not known.....	1,204	5.1	72,963	5.8	336	1.5	18,072	1.5	867	7.4	54,814	9.3
Not known.....	614	26.2	33,637	2.7	467	2.1	24,873	2.1	133	1.1	7,982	1.3

1/ Includes an estimated 982 registered nurses for whom it was not known whether or not they were employed in nursing.

NOTE: Estimated number and percent may not add to total due to rounding.



Table 2. Registered nurse population, by marital status and employment status: November 1980

Marital status	Totals 1/		Employed in nursing full-time				Employed in nursing part-time				Employed in nursing full- or part-time not known				Not employed in nursing			
	Number in sample	Estimated number	Number in sample	Percent	Number in sample	Percent	Number in sample	Percent	Number in sample	Percent	Number in sample	Percent	Number in sample	Percent	Number in sample	Percent	Number in sample	Percent
Total.....	30,436	1,615,846	100.0		15,068	826,936	100.0		7,508	396,616	100.0			236	12,600	100.0		
Married.....	28,671	1,144,537	70.0		9,544	491,827	59.4		6,493	341,633	86.4			154	8,246	66.4		
With children under 6 only....	3,855	193,506	12.0		1,247	66,620	7.3		1,661	84,666	21.4			28	1,467	11.6		
With children 6 and over only....	8,366	461,669	28.0		3,702	191,930	23.2		2,633	133,352	36.2			57	3,007	24.2		
With children both age groups.	2,314	121,716	7.5		708	36,901	4.3		940	49,628	12.6			12	634	5.0		
No children at home.....	7,020	379,682	22.9		3,861	201,341	24.3		1,246	62,679	16.8			53	2,772	22.0		
No information on marital status.....	116	6,676	.4		36	1,726	.2		23	1,308	.3			4	326	2.6		
Never married.....	4,354	237,132	14.7		3,400	186,809	22.6		421	27,766	7.0			32	1,953	16.6		
Widowed, divorced, separated.....	4,164	221,631	13.7		2,763	144,407	17.6		532	27,606	6.7			38	1,796	14.3		
No information on marital status.....	297	12,644	.8		111	6,193	.7		62	3,620	1.0			12	604	4.8		

1/ Includes an estimated 882 registered nurses for whom it was not known whether or not they were employed in nursing.

NOTE: Estimated number and percent may not add to total due to rounding.

Table 3. Registered nurse population, by basic and highest nursing-related education: November 1980

Highest nursing-related education	Totals 1/ 2/				Associate degree				Basic nursing education				Baccalaureate			
	Number in sample	Estimated Number	Percent	100.0	Number in sample	Estimated Number	Percent	100.0	Number in sample	Estimated Number	Percent	100.0	Number in sample	Estimated Number	Percent	100.0
Total.....	30,436	1,615,046	100.0		5,800	280,208	100.0		18,777	1,023,898	100.0		5,608	279,187	100.0	
Associate degree.....	5,640	285,260	17.7		5,317	271,760	91.1		206	12,879	1.2		-	-	-	
Diploma.....	16,313	881,371	54.6		-	-	-		16,313	881,371	86.1		-	-	-	
Baccalaureate in nursing.....	6,215	316,202	19.6		303	16,162	5.4		1,036	57,174	5.6		4,068	242,627	86.9	
Baccalaureate in other field.....	646	40,358	2.5		103	9,451	1.8		528	33,886	3.2		27	1,659	.6	
Master's in nursing.....	1,003	53,166	3.3		48	2,634	.9		402	22,258	2.2		607	26,006	9.2	
Master's in other field.....	450	25,484	1.6		28	2,139	.7		258	15,168	1.5		155	7,597	2.7	
Doctorate.....	69	4,000	.2		1	72	.0		34	1,953	.2		31	1,699	.6	
not known.....	181	10,026	.6		-	-	-		-	-	-		-	-	-	
Total employed in nursing.....	23,602	1,235,152	100.0		5,073	281,263	100.0		13,785	735,641	100.0		4,553	228,168	100.0	
Associate degree.....	4,807	247,246	20.0		4,661	237,826	91.0		143	8,936	1.2		-	-	-	
Diploma.....	11,917	628,657	50.9		-	-	-		11,917	628,658	85.5		-	-	-	
Baccalaureate in nursing.....	4,906	256,834	20.6		269	14,912	5.6		768	42,476	5.8		3,863	197,933	86.7	
Baccalaureate in other field.....	531	31,730	2.6		86	4,640	1.8		419	26,766	3.6		22	1,073	.5	
Master's in nursing.....	823	43,424	3.5		43	2,482	1.0		319	17,431	2.4		426	21,686	9.6	
Master's in other field.....	362	19,653	1.6		23	1,029	.7		196	11,192	1.5		126	6,030	2.6	
Doctorate.....	53	2,884	.2		1	72	.0		23	1,184	.1		27	1,446	.7	
not known.....	123	6,620	.6		-	-	-		-	-	-		-	-	-	
Total not employed in nursing.....	6,812	379,712	100.0		727	36,945	100.0		4,977	287,470	100.0		1,034	51,003	100.0	
Associate degree.....	4,733	36,013	10.0		666	33,924	91.8		63	3,944	1.4		-	-	-	
Diploma.....	1,218	61,151	16.1		34	1,748	4.7		4,342	252,013	87.7		-	-	-	
Baccalaureate in nursing.....	133	8,880	2.3		17	810	2.2		268	14,698	5.1		914	44,678	87.6	
Baccalaureate in other field.....	180	9,721	2.6		6	162	.4		109	7,328	2.6		6	306	.7	
Master's in nursing.....	97	5,845	1.5		5	310	.9		83	4,028	1.7		81	4,119	8.1	
Master's in other field.....	16	1,116	.3		-	-	-		61	3,880	1.4		30	1,567	3.1	
Doctorate.....	53	3,265	.8		-	-	-		11	769	.2		4	253	.5	
not known.....	-	-	-		-	-	-		-	-	-		-	-	-	

1/ includes an estimated 982 registered nurses for whom it was not known whether or not they were employed in nursing.

2/ includes an estimated 1,373 whose basic nursing education was in a Master's degree program and an estimated 13,180 for whom the type of basic nursing education was not known.

NOTE: Estimated number and percent may not add to total due to rounding.

Table 4. Registered nurses with Master's or Doctoral degrees, 1/  
by primary focus of the degree: November 1980

Primary focus	Number in sample	Estimated	
		Number	Percent
Total	1,522	82,629	100.0
Education.....	489	27,348	33.1
Supervision/administration.....	240	13,864	16.8
Clinical practice.....	672	34,844	42.2
Community/public health.....	85	4,339	5.3
Maternal-child.....	122	6,215	7.5
Midwifery.....	20	975	1.2
Geriatrics/gerontology.....	6	425	.5
Medical/surgical.....	169	8,603	10.4
Psychiatric/mental health....	180	9,489	11.5
Other.....	85	4,644	5.6
Not known.....	5	154	.2
Other.....	86	4,809	5.8
Not known.....	35	1,766	2.1

1/ Excludes those whose highest degree was a Master's degree received in their basic nursing education.

NOTE: Estimated number and percent may not add to total due to rounding.

Table 5. Employment setting of primary positions of registered nurses employed in nursing: November 1980

Employment setting	Number in sample	Estimated	
		Number	Percent
Total.....	21,802	1,238,152	100.0
<u>Hospital</u> .....	18,398	810,881	65.6
<u>Nursing homes or extended care facility</u> ...	1,882	98,851	8.0
<u>Public/community health</u> .....	1,814	82,523	6.5
State health department.....	193	9,083	.8
City or county health department.....	489	24,989	2.0
Combination nursing service.....	23	1,127	.1
Visiting nurse service.....	387	17,831	1.4
Community mental health center.....	141	7,788	.6
Neighborhood health center.....	48	2,548	.2
Planned parenthood/family planning center.....	53	2,887	.2
Rural health center.....	35	1,190	.1
Other.....	284	13,779	1.1
<u>Physicians or dentists offices</u> .....	1,429	70,176	5.7
Sole practice.....	988	28,482	2.3
Partnership w/one or more.....	546	25,718	2.2
Group practice.....	232	10,391	.9
Health maintenance organization.....	52	3,001	.2
Other.....	34	1,584	.1
<u>Student health service</u> .....	775	43,539	3.5
Board of education (public school).....	515	30,219	2.4
Private, elementary or secondary.....	87	4,447	.4
College or university.....	135	6,895	.5
Other.....	38	2,178	.2
<u>Nursing education</u> .....	930	46,114	3.6
LPN/LVN program.....	143	6,513	.5
Diploma program.....	165	8,766	.7
Associate degree program.....	196	9,867	.8
Baccalaureate or higher degree.....	304	14,193	1.1
Other.....	122	5,775	.5
<u>Occupational health</u> .....	527	28,112	2.3
Private industry.....	359	20,171	1.6
Government.....	136	6,380	.6
Other.....	32	1,561	.1
<u>Private duty nursing</u> .....	380	19,617	1.6
<u>Other self-employed</u> .....	208	10,332	.9
Sole practice.....	45	2,272	.2
Partnership w/ other nurses.....	15	588	.1
Joint practice between phys. & nurse.....	31	1,212	.1
Partnership with other professionals.....	12	508	.0
Other.....	105	5,751	.5
<u>Other</u> .....	382	21,076	1.7
Central or regional federal agency.....	24	1,579	.1
State board of nursing.....	7	584	.1
Nursing health association.....	10	644	.1
Health planning agency.....	9	435	.0
Other.....	332	17,854	1.4
<u>Not known</u> .....	135	6,989	.6

NOTE: Estimated number and percent may not add to total because of rounding.

Table 6. Position titles in primary nursing job for registered nurses employed in nursing: November 1980

Type of position and position title	Number in Sample	Estimated	
		Number	Percent
Total .....	23,602	1,235,152	100.0
<u>Administrator</u> .....	1,205	59,804	4.8
Administrator or assistant .....	348	18,332	1.5
Dean, director, or assistant associate/ director of nursing education .....	93	5,089	.4
Director or assistant/associate director of nursing services .....	764	36,383	2.9
<u>Clinical nursing specialist</u> .....	346	18,465	1.5
<u>Consultant</u> .....	160	7,879	.7
<u>General duty/staff nurse</u> .....	15,231	800,368	64.8
Charge nurse .....	2,714	139,944	11.3
General duty nurse .....	2,065	103,146	8.4
Public health nurse .....	585	28,005	2.3
School nurse .....	636	36,334	2.9
Staff nurse .....	7,909	422,561	34.2
Team leader .....	694	37,906	3.1
no position title (only registered nurse on staff) .....	628	32,472	2.6
<u>Head nurse</u> .....	1,625	87,292	7.1
<u>Instructor</u> .....	1,171	58,594	4.7
Inservice education director or instructor .....	337	18,207	1.5
Instructor .....	645	30,948	2.5
Professor or assistant/associate .....	189	9,439	.7
<u>Nurse anesthetist</u> .....	306	14,168	1.1
<u>Nurse clinician</u> .....	168	7,840	.7
<u>Nurse midwife/practitioner</u> .....	334	16,212	1.3
Nurse midwife .....	24	1,229	.1
Nurse practitioner .....	310	14,983	1.2
<u>Private duty nurse</u> .....	362	22,277	1.8
<u>Researcher</u> .....	43	2,446	.2
<u>Supervisor</u> .....	1,424	73,904	6.0
<u>Other</u> .....	1,099	59,453	4.8
Nurse coordinator .....	258	14,535	1.2
Patient care coordinator .....	149	8,646	.7
Other .....	682	36,272	2.9
<u>not known</u> .....	129	6,451	.5

NOTE: Estimated number and percent may not add to total because of rounding.

Table 7. Field of employment and type of position of employed registered nurses.  
November 1980

Field of employment	Administrator or assistant	Consultant	Supervisor or assistant	Instructor	Head nurse or assistant	General duty staff	Nurse practitioner	Clinical nurse specialist	Nurse clinician	Nurse anesthetist	Other	Not known
Total	59,804	7,079	73,904	58,594	87,292	800,368	18,212	18,466	7,040	14,168	84,176	6,481
Hospital	22,437	1,084	46,969	16,567	72,427	593,411	5,600	13,176	4,461	11,684	32,684	1,561
Nursing home	19,354	1,043	14,186	1,938	5,681	52,943	64	154	38	--	3,307	173
Nursing education	3,791	81	344	36,314	226	2,254	93	401	134	260	1,041	164
Public health/community health	7,302	1,948	7,163	680	2,441	46,490	4,129	1,990	672	56	7,669	93
Student health service	1,121	122	367	1,266	462	37,424	1,009	256	246	--	1,257	21
Occupational health	1,038	678	1,173	223	1,060	19,711	279	260	359	32	2,404	206
Physician's or dentist's office	1,274	293	1,977	544	3,038	46,202	4,042	1,726	1,654	387	8,362	608
Other	3,171	2,690	1,496	1,866	1,063	9,818	1,076	477	286	1,003	27,180	96
Not known	316	41	231	178	213	2,117	--	27	--	67	349	3,430

NOTE: Estimated number may not add to total because of rounding.

Table 8. Distribution of employed registered nurses, by percentage of time spent during the usual work week in each functional area: November 1980

Percentage of time	Administration			Consultation			Direct patient care		
	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent
Total.....	23,602	1,235,152	100.0	23,602	1,235,152	100.0	23,602	1,235,152	100.0
None.....	14,110	743,514	60.2	12,431	647,226	52.4	2,612	136,941	11.1
1-24.....	5,194	268,839	21.8	8,903	465,403	37.7	2,619	131,018	10.6
25-49.....	1,807	92,771	7.5	1,038	55,275	4.5	2,447	123,659	10.0
50-74.....	1,046	52,146	4.2	230	12,480	1.0	4,447	232,573	18.8
75-100.....	553	28,721	2.3	108	5,608	.4	10,685	561,790	45.6
Not known.....	892	49,160	4.0	892	49,160	4.0	892	49,160	4.0

Percentage of time	Research			Supervision			Teaching		
	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent	Number in sample	Estimated Number	Percent
Total.....	23,602	1,235,152	100.0	23,602	1,235,152	100.0	23,602	1,235,152	100.0
None.....	18,622	972,235	78.7	10,335	548,811	44.4	16,300	850,158	68.8
1-24.....	3,837	200,480	16.2	6,885	356,873	28.9	4,793	252,374	20.4
25-49.....	133	6,996	.6	2,831	143,295	11.6	596	31,611	2.6
50-74.....	61	3,043	.2	1,868	95,232	7.7	374	20,268	1.6
75-100.....	57	3,239	.3	791	41,782	3.4	645	31,680	2.6
Not known.....	892	49,160	4.0	892	49,160	4.0	892	49,160	4.0

NOTE: Estimated number and percent may not add to total because of rounding.

Table 7. Field of employment and type of position of employed registered nurses.  
November 1960

Field of employment	Administrator or assistant	Consultant	Supervisor or assistant	Instructor	Nurse or assistant	Head nurse or staff	General duty staff	Nurse practitioner	Clinical nurse specialist	Nurse clinician	Nurse anesthetist	Other	Not known
Total .....	1,236,152	59,804	7,879	73,904	58,594	87,292	800,368	16,212	18,465	7,040	14,168	84,176	6,451
Hospital.....	810,851	22,437	1,094	46,969	15,567	72,427	583,411	5,500	13,175	4,451	11,684	32,684	1,561
Nursing home.....	98,851	19,354	1,043	14,196	1,936	8,681	52,943	84	154	38	--	3,347	173
Nursing education..	46,114	3,791	81	344	36,314	226	2,254	93	401	134	250	1,041	184
Public health/ community health.	80,522	7,302	1,948	7,163	680	2,441	46,490	4,129	1,990	672	56	7,569	93
Student health service.....	43,539	1,121	122	357	1,265	452	37,424	1,009	256	246	--	1,257	21
Occupational health.....	28,112	1,038	678	1,173	223	1,850	19,711	279	260	359	32	2,404	205
Physician's or dentist's office.	70,176	1,274	293	1,977	544	3,038	46,202	4,042	1,725	1,654	307	6,352	606
Other.....	51,025	3,171	2,690	1,495	1,885	1,053	9,815	1,076	477	285	1,803	27,180	96
Not known.....	6,959	316	41	231	178	213	2,117	--	27	--	57	349	3,430

NOTE: Estimated number may not add to total because of rounding.



Table 9. Registered nurses employed in each employment setting, by employment setting, employment status, and average annual hour worked: November 1980

Field of employment	Estimated total 1/			Employed full-time			Employed part-time		
	Number of nurses	Percent	average annual hours worked	Number of nurses	Percent	average annual hours worked	Number of nurses	Percent	average annual hours worked
Total.....	1,236,152	100.0	1,714	826,937	67.0	2,031	306,015	32.0	1,037
Hospital.....	810,851	100.0	1,766	556,296	68.6	2,070	249,076	30.8	1,004
Nursing home.....	98,831	100.0	1,603	53,144	53.6	2,057	46,163	46.7	1,056
Nursing education.....	45,114	100.0	1,618	34,440	76.3	1,945	10,653	23.4	814
Public/community health.....	80,522	100.0	1,816	62,857	78.1	2,026	16,454	20.4	1,033
Student health services.....	43,540	100.0	1,327	31,194	71.6	1,626	11,956	27.6	794
Occupational health.....	28,112	100.0	1,803	22,726	80.8	2,075	4,287	15.2	882
Physician's/dentist's office.....	70,177	100.0	1,859	39,691	56.6	1,943	30,084	42.9	990
Private duty.....	19,617	100.0	1,194	5,239	26.7	2,016	14,053	71.6	836
Other self-employed.....	10,332	100.0	1,092	3,471	33.6	2,058	6,750	65.3	644
Other.....	21,076	100.0	1,818	16,256	77.4	2,114	5,747	27.3	955
Not known.....	6,950	100.0	1,736	2,631	37.8	1,946	556	8.0	1,143

1/ Includes an estimated 12,600 nurses for whom no information was available on full-time or part-time employment.

Table 10. Type of position and highest nursing-related educational preparation of registered nurses employed in nursing: November 1980

Type of position	Highest nursing-related educational preparation											
	Estimated total 1/ Number	Percent	Associate degree Number	Percent	Diploma Number	Percent	Baccalaureate Number	Percent	Master's Number	Percent	Doctorate Number	Percent
Total .....	1,236,152	100.0	247,247	20.0	628,658	50.9	286,765	23.2	62,978	5.1	2,884	.2
Administrator or assistant ...	59,804	100.0	5,623	9.4	27,941	46.7	14,197	23.8	10,918	18.3	864	1.4
Consultant .....	7,879	100.0	874	8.5	3,055	38.8	2,239	28.4	1,828	23.2	38	.5
Supervisor or assistant .....	73,904	100.0	12,614	17.1	44,249	59.9	14,097	19.1	2,501	3.4	-	-
Instructor .....	58,594	100.0	4,043	6.9	11,914	20.3	18,721	32.0	22,045	37.6	1,494	2.6
Nurse practitioner/midwife ...	16,212	100.0	1,715	10.5	6,816	40.2	4,786	29.6	3,078	19.0	24	.1
Clinical nursing specialist ..	18,465	100.0	2,706	14.7	6,784	36.7	3,862	21.0	4,938	26.7	132	.7
Head nurse or assistant .....	87,292	100.0	16,259	18.6	50,413	57.8	19,187	22.0	1,274	1.6	-	-
Nurse clinician .....	7,840	100.0	1,128	14.4	3,376	43.1	2,084	26.6	1,021	13.0	186	2.4
General duty/staff nurse .....	800,369	100.0	106,582	23.3	416,188	51.9	184,525	23.1	10,078	1.3	-	-
Nurse anesthetist .....	14,168	100.0	2,711	19.1	7,942	56.1	3,160	22.4	227	1.6	-	-
Other .....	84,175	100.0	12,169	14.5	48,107	57.2	18,062	21.5	4,771	5.7	118	.1
Not known .....	6,451	100.0	1,022	15.9	3,173	49.2	1,846	28.6	301	4.7	28	.4

1/ Includes an estimated 6,620 nurses for whom no information was available on highest nursing-related educational preparation.

NOTE: Estimated number and percent may not add to total because of rounding.

Table 11. Registered nurses employed as nurse practitioners/  
midwives, by whether formal training was taken:  
November 1980

Formal training	Number in sample	Estimated	
		Number	Percent
Total.....	334	16,212	100.0
Received formal training.....	269	12,598	77.7
Certificate.....	230	10,646	65.7
Master's.....	30	1,453	9.0
Other.....	8	467	2.9
Not known.....	1	33	.2
Did not receive formal training...	65	3,614	22.3
<u>Type of specialty studied</u>			
Total.....	269	12,598	100.0
Pediatrics.....	55	2,499	19.8
Midwifery.....	20	1,004	8.0
Maternity.....	18	863	6.9
Family.....	84	3,639	28.9
Adult.....	36	2,071	16.4
Psychiatric.....	2	61	.5
Geriatric.....	2	26	.2
School.....	5	138	1.1
Other.....	42	1,946	15.4
Not known.....	5	350	2.8

NOTE: Estimated number and percent may not add to total because of rounding.

Table 12. Registered nurses working through temporary employment services, by highest nursing-related educational preparation: November 1990

Highest nursing-related educational preparation	Number in sample	Total		JES agency employing in principal position		JES agency employing in secondary position(s) only	
		Number	Percent	Number	Percent	Number	Percent
Total.....	641	37,162	100.0	10,077	100.0	19,085	100.0
Associate degree.....	190	11,114	29.9	4,611	25.5	6,504	34.1
Diploma.....	256	14,619	39.3	8,858	49.0	5,762	30.2
Baccalaureate.....	164	9,828	26.4	4,108	22.7	5,719	30.0
Master's.....	29	1,457	3.9	476	2.6	980	5.1
Doctorate.....	1	24	.1	24	.1	-	-
Not known.....	1	120	.3	-	-	120	.5

NOTE: Estimated number and percent may not add to total because of rounding.

Table 13. Average annual earnings of registered nurses employed full-time in their principal nursing position, by field of employment and type of position: November 1968

Field of employment	Total	Administrator or assistant	Consultant	Supervisor or assistant	Instructor	Nurse practitioner/ midwife	Clinical nurse specialist	Nurse clinician	Head nurse or assistant	General duty/ staff	Nurse anesthetist
Total.....	\$17,303 1/	\$21,467	\$19,916	\$18,761	\$18,021	\$19,396	\$18,612	\$19,021	\$17,253	\$16,992	\$20,716
Hospital.....	17,004	20,628	2/	19,820	19,343	20,513	19,412	19,676	17,719	16,451	27,665
Nursing home.....	19,608	17,304	2/	18,364	2/	2/	2/	2/	13,962	14,332	2/
Nursing education....	19,306	25,268	-	2/	18,763	2/	2/	2/	2/	2/	2/
Public health/ community health...	16,710	20,829	19,648	17,961	2/	17,685	2/	2/	16,892	16,068	2/
Students health center	16,072	2/	2/	2/	2/	2/	2/	2/	2/	14,678	2/
Occupational health...	16,738	2/	2/	2/	2/	2/	2/	2/	18,465	18,710	2/
Physicians/dentists office.....	13,272	2/	2/	16,374	2/	19,195	13,807	2/	13,606	11,938	2/

1/ Includes all registered nurses in positions not separately identified, as well as those itemized separately.  
2/ Too few to compute average.

Table 14. Registered nurses actively seeking nursing employment,  
by type of employment sought and number of weeks looking:  
November 1980

Type of employment and weeks looking	Number in sample	Estimated	
		Number	Percent
Total.....	593	31,652	100.0
<u>Type of employment</u>			
Full-time.....	178	8,435	26.6
Part-time.....	392	21,934	69.3
Not known.....	23	1,283	4.1
<u>Number of weeks looking</u>			
Less than a week.....	143	7,068	22.3
1-4 weeks.....	175	9,490	30.0
5-9 weeks.....	85	4,564	14.4
10-14 weeks.....	52	2,521	8.0
15-24 weeks.....	33	1,877	5.9
25 and over.....	41	2,045	6.5
Not known.....	64	4,087	12.9

Table 15. Type of employment of registered nurses employed  
in non-nursing occupations 1/: November 1980

Type of employment	Number in sample	Estimated	
		Number	Percent
Total.....	1,358	73,934	100.0
Health-related occupation.....			
Full-time.....	418	23,428	31.7
Part-time.....	286	16,078	21.8
Not known.....	131	7,222	9.8
	1	128	.2
Non-health-related occupation.....			
Full-time.....	906	48,856	66.1
Part-time.....	497	26,486	35.8
Not known.....	399	22,055	29.8
	10	315	.4
Not known.....	34	1,650	2.2

1/ Includes an estimated 6,436 nurses who were employed in a non-nursing field, but were also actively seeking nursing employment.

NOTE: Estimated number and percent may not add to total because of rounding.

Table 16. Age group and marital status of registered nurses who are not employed and not seeking employment: 1/ November 1960

Marital status	Total 2/		Less than 30 years		30-39 years		40-49 years		50-59 years		60 and over	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Totals.....	280,563	100.0	28,565	100.0	63,000	100.0	43,402	100.0	53,994	100.0	94,373	100.0
Married												
With children under 6 only.....	35,540	13.0	19,422	68.0	16,099	25.6	449	1.0	-	-	40	.1
With children 6 and over only.....	74,423	26.5	442	1.5	19,600	30.7	31,226	71.9	17,406	32.2	4,050	5.8
With children in both age groups.....	28,444	10.1	1,825	6.4	21,773	34.1	3,053	6.9	336	.7	295	.3
No children at home.....	94,093	30.0	3,219	11.3	3,057	4.8	4,828	11.1	29,203	54.1	41,431	49.1
Not known.....	2,721	1.0	-	-	77	.1	25	.1	76	.1	2,816	3.0
Widowed, divorced, separated	35,435	12.6	570	2.0	1,405	2.2	1,942	4.5	4,641	8.6	25,450	30.2
Never married.....	17,256	6.2	3,051	10.7	1,171	1.8	1,051	2.4	2,201	4.1	9,571	11.3
Not known.....	1,642	.6	36	.1	307	.5	10	.1	133	.2	210	.2

1/ Includes all those not employed in nursing who did not indicate they were actively seeking nursing employment or that they were employed in a field other than nursing.

2/ Includes an estimated 5,349 nurses for whom age group was not known.

NOTE: Estimated number and percent may not add to total because of rounding.

## Appendix B. Survey Methodology

The data for this study were collected from a sample of all those holding current licenses to practice as registered nurses. The design for the study was initially developed in 1975-76 under a contract the Division of Nursing, Bureau of Health Professions, Health Resources Administration had with Westat, Inc.

The survey design had to take into account a number of aspects about the registered nurse population. For one, there is no overall, up-to-date list of registered nurses in the country. There are only those lists maintained by each of the State Boards of Nursing. Thus, there are 51 separate, nonuniform, sampling frames from which the sample is to be drawn. Moreover, to add to the complexities of the development of the sample, registered nurses may hold licenses in more than one State and, therefore, there are duplications in individuals among the 51 State lists. In addition, a number of registered nurses are not licensed in their State of residence and/or State of employment although they are licensed somewhere in the country. Finally, two other attributes of this particular group have to be considered. One, registered nurses are predominantly female and are subject to name changes. Second, as a predominantly employee rather than self-employed group, they are fairly mobile.

Other considerations that were necessary to take into account in designing the approach were that the plan was to be applicable to maintaining current data on the registered nurse population and to providing certain State by State characteristics.

All of these points were incorporated in the survey design established by Westat, Inc. A fuller explanation of the design can be found in the complete report of the first national sample survey conducted by the American Nurses' Association under contract to the Division of Nursing <sup>1/</sup> and in the report of this current study, prepared by the contractor, Research Triangle Institute, which will be available shortly. Following is a brief synopsis of the approach taken.

### Sample

While the initial sampling design was predicated on a replication of the survey annually, the design was still appropriate to the repeat of the survey process three years after the initial study was made. The selection of registered nurses to be included in the sample is based on name. Using a sample of names obtained from the Inventory of Registered Nurses, the entire universe was alphabetized by last name and first name initial and proportionately equally sized alphabetic segments were derived. The "alpha

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<sup>1/</sup> Roth, Alada V., et al. 1977 National Sample Survey of Registered Nurses. Stock No. HRP 0900603, National Technical Information Service, Springfield, Va. 1978.



segments" represented clusters of names that were alphabetically adjacent to one another. To increase the reliability of the estimates for both large and small States but maintain the study within a limited budget, nurses in different States are sampled at different rates. Thus, States that are small in nurse population had higher sampling rates (though smaller sample sizes) than larger States. The differential sampling rates were accomplished by varying the number of "alpha segments" selected in each State.

Because of the multiple licenses that a significant proportion of the nurses hold, steps had to be taken to ensure that a single probability of sample selection, and therefore a single weight, could be assigned to each nurse in the sample. The system was devised so that the probability that any given nurse would fall in the sample was equal to the highest sampling rate among the States in which the nurse was licensed. This result was achieved by "nesting" each State's sample into the others through the use of an overlapping "alpha segment" procedure. The States having higher sampling rates have the broader alphabetic segment and those with lower rates a smaller proportion of that broader segment.

The final sample selected in each State was placed on a computer tape, merging each of these samples into a single file. An initial unduplication of nurses from State-to-State was then accomplished by removing any duplicates from this file. In total, the aggregated number of names selected for the sample in the 1980 study was 43,986. After the initial unduplication, 39,573 were included in the sample. The data were collected through the use of mail questionnaires.

#### Data Collection Procedures

To ensure adequate response to the study there were three waves of questionnaire mailings to the individuals in the sample, an initial and two follow-ups to those who did not respond to the prior mailing. Finally, there were telephone calls to a sample of those who were still nonrespondents after the mailings were completed. The resulting response rate was as follows:

<u>Total Sample</u>	<u>39,573</u>
<u>Respondents</u>	<u>30,703</u>
Nurses who completed questionnaire	30,596
Deceased nurses	66
Persons ineligible for survey	41
<u>Nonrespondents</u>	<u>8,068</u>
<u>Duplicates</u>	<u>802</u>

Calculation of response rate:

$$\frac{30,703}{39,573 - 802} = .7919 \text{ or } 79.2\%$$

### Estimation Procedure

To provide estimates of the number of those in the registered nurse population with a certain given characteristic each respondent to the survey was assigned a weight so that the respondent represented a number of nurses who had active licenses to practice in the country in November 1980. The computation of the weights was based on the number of respondents in relation to the State registration counts. Individual respondents were provided with the weight for the State to which assigned according to the "priority" order of the States. The State with the largest sampling factor has first priority and the one with the smallest is listed last. Thus, the State of assignment was the one for which the nurse would have a probability of being selected at the highest rate if the nurse had more than one license and could be selected in more than one State. If the nurse had only one license that was the State of assignment for weighting purposes. 2/ The estimates of the numbers of persons with a certain type of characteristic, therefore, are an aggregate of the weights of the individual respondents with that characteristic.

### Reliability of the Estimates

Since the estimates provided in this study are based on a sample rather than a total enumeration they may differ somewhat from the numbers that would be obtained if a complete census was taken using the same questionnaire. In all studies there may be errors related to the completeness of respondent coverage, interpretation of questions, and appropriateness of coding and editing of the data. In sample studies there may also be errors due to sampling. These sampling errors can be approximated through the use of standard errors. The standard errors may also measure the effect of some nonsampling errors of response but could not deal with any systematic bias in the data that might result from nonsampling errors such as those indicated previously.

Research Triangle Institute, the contractor for the study, developed estimates of standard errors for a number of important variables or characteristics in the study by use of the Taylor series linearization method. From these direct estimates they also developed design effect factors for use in a more generalized approach to the estimation of the standard errors. The following standard error approximation approaches measure the sampling variability of the national data included in this preliminary report. The chances are about 68 out of 100 that an estimate from the survey differs from that which would be obtained in a complete census by less than the standard error. The chances are about 95 out of 100 that the estimate would differ from the census by 1.96 standard errors.

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2/ It should be pointed out that the State of license is only used for weighting purposes. Nurses are assigned to the State in which they are actually located when findings are presented in terms of geographic distribution.

The formula to use to approximate the standard error of an estimated percent of registered nurses nationally having a given characteristic is:

$$\sigma \hat{Y}/\hat{X} = \sqrt{1.4 \cdot \hat{Y}/\hat{X} \cdot (1-\hat{Y}/\hat{X})/n} \cdot 100$$

where:

$\hat{Y}$  = the estimated number of registered nurses with the given characteristics

$\hat{X}$  = the estimated total number of registered nurses from which  $\hat{Y}$  is drawn

$n$  = the actual number of respondents from which  $\hat{X}$  is derived

Thus, the estimated standard error of the percentage of registered nurses who are employed in nursing in the United States would be calculated from the data in Table 1 as follows:

$$(1) 100 \cdot \frac{1235152}{1615846} = 76.4\%$$

$$(2) 100 \sqrt{1.4(.764)(1-.764)/30436} = .28\%$$

In about 95 out of 100 chances the true percent of registered nurses in the United States who are employed in nursing would be 75.8% - 77.0%.

To determine the approximate standard error of the estimated number of registered nurses in the United States as a whole with a given characteristic, the following formula would be used:

$$\sigma \hat{Y} = \hat{Y} \sqrt{\frac{1.4(1-\hat{Y}/\hat{X}) + (.0009)}{n \cdot \hat{Y}/\hat{X}}}^2$$

The approximate standard error of the estimated number of employed registered nurses is:

$$1,235,152 \sqrt{\frac{1.4(1-.764) + (.0009)}{30436 (.764)}}^2 = 4782$$

Therefore, in about 95 out of 100 chances, the actual number of registered nurses employed in nursing in the United States in November 1980 was 1,225,780 - 1,244,524.

With regard to the sampling variability, care should be exercised in interpreting data based on small samples such as where the totals are based on less than 25 in the sample or where a percentage is based on less than 10 in the sample out of a sample count of more than 25.

While the formulae included here provide the means to approximate the standard errors for much of the data in this report, for a much fuller discussion of the reliability of the estimates drawn from the study and the approaches to deriving standard errors of the estimates, the reader is urged to consult the full report of the 1977 study 3/ and the contractor's report for the 1980 study.

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3/ Roth, Op. Cit.

APPENDIX C  
Questionnaire Used in Survey

This survey is being conducted by the Research Triangle Institute under a contract with the Bureau of Health Professions, HRA, PHS, U.S. Department of Health and Human Services. All your responses are very important to the accuracy of our research. In addition, they are confidential and completely voluntary. The information is for statistical purposes only and will not be connected with your name.

The questionnaire has been divided into four sections. These sections are designed to gather information on (1) your educational background as a registered nurse, (2) your employment status in nursing, (3) your employment status if you are not currently employed in nursing, and (4) general information.

**Thank you for your cooperation. Your efforts are highly appreciated.**

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100

[illegible]

**NOTE:** Your responses will be read by an optical mark reader. Please review the following marking directions and examples before completing this questionnaire.

**MARKING DIRECTIONS**

- Use a black lead pencil only (No. 2 or 2½).
- Make heavy dark marks that fill the circle completely.
- Erase clearly any response you wish to change.
- Make no stray marks of any kind on this sheet; write only in places provided.
- Carefully review the examples provided below on how to complete number and word responses.

**MARKING EXAMPLES:**

- Fill in circles completely

Proper mark → ● ○ ○ ○

Improper marks → ✗ ✗ ✗ ✗

- Written Responses

If written responses are requested, please keep your comments within the boxed area provided. →

- Number grids

If you are asked to give numbers for your answer, please record as shown below.

If your answer is 150 →

0	1	5	0
●	●	●	●
○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○
○	○	○	○

- Write the numbers in the boxes, making sure the last number is always placed in the right-hand box.
- Fill in the unused boxes with zeros.
- Then, mark the matching circle below each box.

- Example of date grid  
(If March 1962)

Month	Year
0	3
●	●
○	○
○	○
○	○
○	○
○	○
○	○
○	○
○	○

## SECTION A EDUCATION BACKGROUND AS A REGISTERED NURSE

1. Please indicate (a) the Basic Nursing Education, which prepared you to become a registered nurse; (b) specify the month and year of graduation; and (c) specify the state (or country if not U.S.) in which you received your Basic Nursing Education.

**a. Basic Nursing Education**  
(Mark only one)

- ☐ Diploma  
☐ Associate Degree  
☐ Baccalaureate  
☐ Master's

**b. Date of Graduation**

Month	Year
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
0	0

Write the number in the blank.

Then, mark the matching circle below each box.

(See example on page 2.)

**c. State (or country, if not U.S.) of Basic Nursing Education**

- |                              |   |
|------------------------------|---|
| <input type="radio"/> Ala.   | <input type="radio"/> R.I.  |
| <input type="radio"/> Ak.    | <input type="radio"/> S.C.  |
| <input type="radio"/> Ariz.  | <input type="radio"/> S.D.  |
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| <input type="radio"/> HI.    | <input type="radio"/> Wy.   |
| <input type="radio"/> Id.    |   |
| <input type="radio"/> Ill.   | <input type="radio"/> Canada  |
| <input type="radio"/> Ind.   | <input type="radio"/> Philippines   |
| <input type="radio"/> Iowa   | <input type="radio"/> Puerto Rico   |
| <input type="radio"/> Kan.   | <input type="radio"/> Virgin Islands  |
| <input type="radio"/> Ken.   | <input type="radio"/> Guam  |
| <input type="radio"/> La.    | <input type="radio"/> England   |
| <input type="radio"/> Maine  | <input type="radio"/> West Indies   |
| <input type="radio"/> Mass.  | <input type="radio"/> Thailand  |
| <input type="radio"/> Md.    | <input type="radio"/> Other (specify) <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span> |
| <input type="radio"/> Mich.  |   |
| <input type="radio"/> Minn.  |   |
| <input type="radio"/> Miss.  |   |
| <input type="radio"/> Mo.    |   |
| <input type="radio"/> Mont.  |   |
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| <input type="radio"/> Ohio   |   |
| <input type="radio"/> Ok.    |   |
| <input type="radio"/> Ore.   |   |
| <input type="radio"/> Penn.  |   |

2. Since graduation from the Basic Nursing Education Program, which you indicated in question 1, have you received any additional degrees?

- ☐ Yes (go to questions 3 and 4)  
☐ No (go to question 5)



3. For all additional academic degrees you have received since graduation from your basic nursing program, please indicate in the spaces provided below (a) the type of degree; (b) whether or not the degree is related to your nursing career; (c) the month and year received; and (d) the state (or country, if not U.S.) in which the degree was received.

(a) Type of Degree	(a) Type of Degree	(a) Type of Degree	(a) Type of Degree																																																																																																																
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If your highest degree is a Master's or Doctorate, continue with Question 4;  
otherwise go to Question 5. (below)

4. What is the one primary focus of the highest degree you now hold? (Mark only one)

- ☐ Education  
☐ Supervision/Administration  
☐ Clinical Practice  
☐ Other (specify) →

→ If the primary focus was clinical practice, specify the type.  
(Mark only one)

- ☐ Community/Public Health  
☐ Maternal-child  
☐ Midwifery  
☐ Geriatrics/Gerontology  
☐ Medical/Surgical  
☐ Psychiatric-mental health  
☐ Other (specify) →

5. Are you currently enrolled in a formal education program leading to an  
academic degree with a nursing or nursing-related major?

- ☐ Yes (answer questions 6, 7, and 8)  
☐ No (go to question 9)

6. Are you considered a full-time or part-time student?

- ☐ Full-time student  
☐ Part-time student

7. Specify the type of degree for which you are now studying. (Mark only one)

- ☐ Associate degree  
☐ Baccalaureate degree  
☐ Master's degree  
☐ Doctoral degree

8. How is your education being financed? (Mark all that apply)

- ☐ Personal savings  
☐ Your own personal earnings from employment  
☐ Spouse's earnings from employment  
☐ Parental contributions  
☐ Federal traineeship, scholarship, or grant  
☐ Federally-assisted loan  
☐ State or local government loan or scholarship  
☐ Non-governmental scholarship, loan, or grant  
☐ University teaching or research fellowship  
☐ Employer tuition reimbursement plan  
☐ Other sources (specify) →

A formal nurse practitioner training program is an organized program consisting of formal classes and clinical practice supervised by physicians and/or nurse practitioners which prepares registered nurses to provide primary health care including the ability to obtain a health and medical history; perform a screening physical examination; order routine laboratory examinations; institute treatment under protocols for common self-limiting and/or chronically stabilized conditions; provide teaching and counseling in the area of health promotion and maintenance and to recognize when the patient should be referred to a physician or other health care provider.

8. Did you graduate from a formal nurse practitioner program?

- ☐ Yes (answer questions 9a, 9b, 9c)  
☐ No (go on to question 10)

9a. How many months did you attend this program?

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4
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12

9b. When you completed this program, which of the following did you receive?

(Mark the appropriate response)

- ☐ Certificate  
☐ Master's  
☐ Other (specify) →

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9c. For what practitioner specialty did you study?  
 (Mark only one)

- ☐ Pediatric  
☐ Midwifery  
☐ Maternity  
☐ Family  
☐ Adult  
☐ Psychiatric  
☐ Geriatric  
☐ School  
☐ Other (specify) →

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A continuing education program is a formal learning program designed to update and increase knowledge and skills in health care. Exclude study for an academic degree.

10. Have you participated during the past year in any type of continuing education program?

- ☐ Yes (answer questions 10a, 10b, 10c)  
☐ No (go on to question 11)

10a. In what type(s) of programs did you participate in the past year either inside or outside of your employment setting? (Mark all that apply)

- ☐ Clinical Conference  
☐ Workshop/Institute  
☐ Multi-media (television, telephone, etc.)  
☐ Refresher Program  
☐ Programmed Instruction  
☐ Staff Development  
☐ Other (specify) →

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10b. Mark the category which best describes the total number of hours of instruction offered in the programs you participated in during the past year. Include classroom, demonstration, and supervised practice.

- ☐ Less than 20 hours  
☐ 20-40 hours  
☐ Over 40 hours

10c. How did you finance your continuing education?  
 (Mark all that apply)

- ☐ Self  
☐ Employer  
☐ No cost to participant  
☐ Only took continuing education as part of my regular employment  
☐ Other (specify) →

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If you answered questions 10a, 10b, and 10c, go to Section B, question 12a.

11. If you have not participated in any continuing education programs in the past year, what are your reasons for not participating? (Mark all that apply)

- ☐ No programs available to me  
☐ No programs available which are applicable to my field of interest  
☐ Family responsibilities prevent it  
☐ Feel no need to  
☐ Cannot be released from job  
☐ Job does not require it  
☐ Courses not given at convenient times  
☐ Courses are too expensive  
☐ Other (specify) →

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## SECTION B EMPLOYMENT STATUS

Being employed in nursing would include being on a temporary leave of absence from your nursing position on vacation on sick leave or a private duty nurse not on a case at the moment.

12a. What is the total number of years that you have worked for pay as a registered nurse since you graduated from your basic nursing educational program?

- ☐ One or more years (go to 12b)  
☐ Less than a year (go to 13a)  
☐ Never worked as a nurse (go to Section C, Q. 28)

12b. If more than a year, indicate the number of years.

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13a. Were you employed in nursing as of November 15, 1980?

- ☐ Yes (go to 13b)  
☐ No (go to 14)

13b. Indicate the city, county, and state of employment on November 15, 1980. If you were not employed in a fixed location (e.g., you are a private duty nurse), consider the area where you spent most of your working time as your location of employment.

City

County

State (or country, if not USA)

FOR OFFICE USE ONLY		
City	County	State
0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9
10	10	10
11	11	11
12	12	12
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39	39	

Questions 15-25 refer to your principal employment setting and nursing position. If you currently hold more than one position in nursing, provide your answers in terms of what you consider your principal nursing position during your regular work year. For example, if you hold more than one nursing position (e.g., day/night or winter/summer), consider the principal nursing position as the one at which you spend the greatest amount of time. If you are not currently employed in nursing, skip to Section C, question 26.

15. Using the following list, please mark the one entry from the list which best describes the type of setting in which you are currently working in your principal nursing position.

**MARK ONLY ONE ANSWER**

**Hospital/Extended Care**

- ☐ Hospital, including all hospital clinics (excluding RN or LPN/LVN School of Nursing)
- ☐ Nursing home or extended care facility

**Nursing Education**

- ☐ LPN/LVN program
- ☐ Diploma program (RN)
- ☐ Associate degree program (RN)
- ☐ Baccalaureate and/or higher degree nursing program
- ☐ Other (specify) →

**Public Health/Community Health Setting**

- ☐ Official state health department
- ☐ Official city or county health department
- ☐ Combination (official/voluntary) nursing service
- ☐ Visiting nurse service
- ☐ Community mental health center
- ☐ Neighborhood health center
- ☐ Planned parenthood center/ family planning center
- ☐ Rural health center
- ☐ Other (specify) →

**Student Health Service**

- ☐ Board of education (public school system)
- ☐ Private or parochial elementary or secondary school
- ☐ College or university
- ☐ Other (specify) →

**Occupational Health (Employee Health Service)**

- ☐ Private industry
- ☐ Government
- ☐ Other (specify) →

**Employee in Physician(s) or Dentist(s) Office**

- ☐ Solo practice
- ☐ Partnership (one or more physicians and/or dentists)
- ☐ Group practice
- ☐ Health Maintenance Organization (HMO)
- ☐ Other (specify) →

**Self-Employed/Receive Fee for Service (i.e., not on a salary basis)**

- ☐ Private duty nursing
- ☐ Solo practice
- ☐ Partnership with other nurses
- ☐ Joint practice between physician and nurse
- ☐ Partnership with other health professionals
- ☐ Other (specify) →

**Other**

- ☐ Central or regional office of federal agency
- ☐ State Board of Nursing
- ☐ Nursing or Health Association
- ☐ Health planning agency
- ☐ Other (specify) →

1. Please indicate the type of agency by which you are currently employed in your principal nursing position.  
(Mark only one)

- ☐ 1. Government Agency
- ☐ 2. Temporary Employment Service  
(e.g., UPJOHN, MEDICAL PERSONNEL POOL)
- ☐ 3. Non-profit Hospital
- ☐ 4. Proprietary Hospital
- ☐ 5. Other Non-government Agency  
(except 2-4 above)
- ☐ 6. Self-employed
- ☐ 7. Other (specify) ☐

7. Using the list below, please mark the one item which best corresponds to your current position title for your principal nursing position.  
(Mark only one)

- ☐ Administrator or assistant administrator
- ☐ Charge nurse
- ☐ Clinical nursing specialist
- ☐ Consultant
- ☐ Dean, director, or assistant/associate director of nursing education
- ☐ Director or assistant/associate director of nursing service
- ☐ General duty nurse
- ☐ Head nurse or assistant head nurse
- ☐ Inservice education director or instructor
- ☐ Instructor
- ☐ Nurse anesthetist
- ☐ Nurse clinician
- ☐ Nurse coordinator
- ☐ Nurse midwife
- ☐ Nurse practitioner
- ☐ Patient care coordinator
- ☐ Private duty nurse
- ☐ Professor or assistant/associate professor
- ☐ Public health nurse
- ☐ Researcher or assistant researcher
- ☐ School nurse
- ☐ Staff nurse
- ☐ Supervisor or assistant supervisor
- ☐ Team leader
- ☐ No position title (the only RN on staff)
- ☐ Other (specify) ☐

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18. For your current principal nursing position, please enter the approximate percentage of your time spent in the following areas during a usual work week. Please make sure the total equals 100%.

	Percent
A. Administration .....	_____
B. Consultation with agencies and/or professionals .....	_____
C. Direct patient care, not including staff supervision .....	_____
D. Research .....	_____
E. Supervision .....	_____
F. Teaching nursing or other students in health care occupations (include all class preparation time) .....	_____
G. Other (specify) <input type="checkbox"/>	_____

Total (be sure total equals 100%) .....

If you spend any time during a usual work week in "direct patient care," as indicated in question 18, continue with question 19. Otherwise go to question 20.

19. Indicate for each of the following activities whether it is a part of your regular activities. If it is not an integral part of your direct patient care functions, indicate whether you carry it out sometimes, or seldom/never.  
(Mark one response for each activity)

Activities	Performed Regularly	Performed Sometimes	Performed Seldom/ Never
A. Obtaining health histories .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. Performing complete physical examinations, using instruments (e.g., otoscope, stethoscope, vaginal speculum) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. Performing some portions of physical examinations (e.g., taking vaginal smears, checking fetal heart beat) .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D. Assisting the physician during patient examinations .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
E. Medical management for selected health conditions/problems .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
F. Primary responsibility for management of and delivery by normal mothers .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
G. Selecting plan of treatment as a result of interpreting laboratory test results .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
H. Developing therapeutic plans .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I. Implementing therapy .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
J. Developing and modifying medication requirements .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
K. Administering medications .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
L. Sustaining and supporting persons who are impaired or ill during programs of diagnosis or therapy .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
M. Instructing patients in management of a defined illness .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
N. Instructing and counseling patients and families in the areas of health promotion and maintenance, including involving patients in planning for their own health care .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
O. Primary responsibility for providing .....	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you are employed by an institution or agency and are scheduled to work for the normal "full" work week throughout the normal work year, as defined by the agency, fill in category "1." If you work less than the normal "full" work week and/or less than the normal work year, fill in either "2" or "3," whichever is more appropriate.

If you are self-employed and are generally available for work throughout the year during what would constitute a normal "full" work week, mark category "1." If you restrict yourself to work only a segment of the work week and/or year, mark either "2" or "3" whichever is more accurate.

20. Do you:

- ☐ 1. Work an entire calendar year or school or academic year on a full-time basis?
- ☐ 2. Work an entire calendar year or school or academic year on a part-time basis?
- ☐ 3. Work only part of the normal work year on either a full or part-time basis?

21. Approximately how many hours are you usually scheduled to work during a normal work week (as defined by the agency) at your principal nursing position? If you do not work on a routine schedule, how many hours do you usually work during a week at your principal nursing position? →

HOURS

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

22. Approximately how many weeks are there in your normal work year for your principal nursing position (include paid vacation, etc.)? →

WEEKS

0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9

FOR OFFICE USE ONLY									
A	B	C	D	E	F	G	H	I	J
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1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9

23. Please specify the annual earnings for your current principal position only. Provide gross salary before deductions for taxes, social security, etc. If you do not have a set annual salary, provide an estimate of your annual earnings. (For example, part-time, private duty, or self-employed)

Gross or Estimated Annual Earnings

0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

Write the number in the boxes.

Then, mark the matching circle below each box.

(See example on page 2.)

24. Do you hold more than one position in nursing for pay

- ☐ Yes (answer questions 24a and 24b)
- ☐ No (go on to question 25)

24a. Please indicate the type of work you do in your other nursing position(s) for pay. (Mark all that apply)

- ☐ Private duty nursing
- ☐ Work through Temporary Employment Service
- ☐ Hospital staff nurse
- ☐ Teaching
- ☐ Consultation/Research
- ☐ Other (specify) →

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24b. Please provide an estimate of the total annual earnings for the year from your other nursing position(s).

0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

F	G	H	I	J
0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
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9	9	9	9	9

25. Do you carry any malpractice insurance exclusive of that your employer carries?

- ☐ Yes
- ☐ No

GO TO SECTION D, ITEM 31



**SECTION C**  
**EMPLOYMENT STATUS OF**  
**RNS NOT CURRENTLY**  
**EMPLOYED IN NURSING**

26. How long has it been since you last worked as a registered nurse for pay?

- ☐ Less than a year  
☐ One year or more (please specify)

YEARS

0	1
2	3
4	5
6	7
8	9
10	11
12	13
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16	17
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100	101

29. Indicate the number of weeks during which you have been actively seeking a nursing position.

- ☐ Less than a week  
☐ One week or more (please specify)

WEEKS

0	1
2	3
4	5
6	7
8	9
10	11
12	13
14	15
16	17
18	19
20	21
22	23
24	25
26	27
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96	97
98	99
100	101

27a. Are you currently employed in an occupation other than nursing?

- ☐ Yes (answer questions 27b & 27c)  
☐ No (go to question 28)

27b. Are you considered a full-time or part-time employee?

- ☐ Full-time  
☐ Part-time

27c. Are you employed in a health-related agency or position?

- ☐ Yes  
☐ No

28. Are you actively seeking employment as a registered nurse (e.g., making inquiries as to availability of employment, answering advertisements, having interviews)?

- ☐ Yes (answer questions 29 & 30)  
☐ No (go on to question 31, section D)

30. Are you looking for a full-time or part-time nursing position?

- ☐ Full-time  
☐ Part-time

[illegible]

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MOBILIZATION AND DEFENSE MANAGEMENT TECHNICAL REPORTS  
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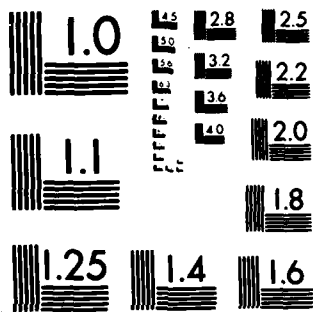
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MICROCOPY RESOLUTION TEST CHART  
NATIONAL BUREAU OF STANDARDS-1963-A

1980  
1979  
1978  
1977  
Prior to 1977

Ala.	Kan.	N.D.
Ark.	La.	Ohio
Ariz.	Maine	Ok.
Ark.	Mass.	Ore.
Calif.	Md.	Penn.
Colo.	Mich.	R.I.
Conn.	Minn.	S.C.
Del.	Miss.	S.D.
D.C.	Mo.	Tenn.
Fl.	Mont.	Tex.
Ga.	Neb.	Utah
Hi.	Nev.	Vt.
Id.	N.H.	Va.
Ill.	N.J.	Wash.
Ind.	N.M.	W. Va.
Iowa	N.Y.	Wis.
Kan.	N.C.	Wy.

We need to know how to get in touch with you should we have any questions regarding your answers. The next few items are for that purpose and will not be associated with your other answers once the data are compiled. Thank you.

**38. What is your phone number?**

[illegible][illegible]

Please note that the following item, #39, is very important in order to determine how many nurses in the country your answers may represent. As soon as this determination is calculated and the proper statistical code assigned, your name(s) and registration number(s) will no longer be associated with the other information.

39. In the space provided below, please list:

Column A — List all states in which you are now actively licensed.

Column B — List the permanent number on your certificate of registration or license for each state you listed.

Column C — List your complete name as it appears on each license, or mark if same as on label.

(A) State of License	(B) Permanent number on certificate of registration or license	(C) Name as it appears on the registration or license, or mark the circle if same as on label.	OFFICE USE ONLY	
			(D)	(E)
1. _____	_____	(same) <input type="radio"/> _____ Last First MI	(1)	
2. _____	_____	(same) <input type="radio"/> _____ Last First MI	(2)	
3. _____	_____	(same) <input type="radio"/> _____ Last First MI	(3)	
4. _____	_____	(same) <input type="radio"/> _____ Last First MI	(4)	
5. _____	_____	(same) <input type="radio"/> _____ Last First MI	(5)	
6. _____	_____	(same) <input type="radio"/> _____ Last First MI	(6)	
7. _____	_____	(same) <input type="radio"/> _____ Last First MI	(7)	
8. _____	_____	(same) <input type="radio"/> _____ Last First MI	(8)	
9. _____	_____	(same) <input type="radio"/> _____ Last First MI	(9)	
10. _____	_____	(same) <input type="radio"/> _____ Last First MI	(10)	

40a. Is your name, as it appears on the label of this questionnaire, correct?

☐ Yes

☐ No (please indicate correct name) →

_____	_____	_____
Last	First	Middle Initial

40b. Is your address, as it appears on the label of this questionnaire, correct?

☐ Yes

☐ No (please indicate your  
correct address) →

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41. Name, address, and telephone number of a person who could forward mail to you or tell us how to communicate with you if you move: \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Initial

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_  
Area Code Number

42. Use this space for any special comments you wish to make about any of your responses to the questions or any additional remarks you may have.

[illegible]

**THANK YOU VERY MUCH FOR YOUR HELP.  
PLEASE RETURN THE QUESTIONNAIRE IN  
THE ENCLOSED PRE-ADDRESSED ENVELOPE.**

**RESEARCH TRIANGLE INSTITUTE, P.O. BOX  
12036, RESEARCH TRIANGLE PARK, N.C.  
27709, ATTENTION: STEVE SLOAN.**

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TABLE 1  
NON-FEDERAL PHYSICIANS BY SPECIALTY AND ACTIVITY

UNITED STATES AND POSSESSIONS									
SPECIALTY	Total Physicians	MAJOR PROFESSIONAL ACTIVITY							
		Total	PATIENT CARE			OTHER PROFESSIONAL ACTIVITY			
			Office Based Practice	HOSPITAL BASED PRACTICE		Medical Teaching	Adminis- tration	Research	Other
				Residents- All Years	Full-Time Physician Staff				
TOTAL PHYSICIANS	443,302	381,915	271,288	59,815	31,032	7,378	10,848	14,288	2,881
GENERAL PRACTICE	58,004	58,683	47,772	6,077	2,834	358	687	87	211
MEDICAL SPEC.	118,983	108,048	78,883	21,352	7,814	2,918	2,847	8,898	442
A	1,488	1,388	1,388		30	18	18	52	7
CD	9,424	7,812	6,728		787	307	208	1,343	84
O	5,388	5,114	4,372	588	183	83	50	112	18
GE	3,838	2,888	2,738		233	182	82	840	7
IM	87,878	80,223	40,514	18,773	3,938	1,327	1,838	4,843	250
PD	27,288	24,487	17,438	4,887	2,084	780	718	1,284	87
POA	483	388	382	8	18	13	4	47	1
POC	847	487	330	18	112	88	29	108	1
PUD	3,441	2,501	2,040		481	188	128	800	18
SURGICAL SPEC.	107,238	103,312	81,877	18,600	4,838	1,230	1,028	1,380	281
GS	32,888	31,414	22,408	7,288	1,738	318	418	487	87
NS	3,248	3,118	2,487	488	184	41	28	87	7
OBG	28,837	24,847	18,503	3,888	1,188	348	348	241	88
OPH	12,880	12,188	10,588	1,242	348	128	88	281	32
ORS	13,538	12,188	10,718	1,803	843	187	81	118	47
OTU	8,217	8,118	5,282	848	208	84	47	88	13
PS	2,924	2,823	2,437	288	130	44	10	40	7
CRS	708	687	687	12	18	2	3	12	2
TS	2,031	1,801	1,803	188	140	27	37	88	7
U	7,488	7,288	8,222	708	331	88	32	88	21
OTHER SPEC.	111,834	98,871	88,738	18,888	18,848	2,874	8,307	4,128	1,787
AN	278	178	182	18	8	8	87	14	18
AN	18,488	14,827	11,338	1,408	1,782	588	188	211	38
CHP	3,188	2,888	1,888	174	483	144	231	202	34
OR	8,878	8,232	4,188	1,228	818	148	40	130	128
FOP	238	138	117	8	10	11	28	10	54
N	8,348	4,821	3,248	888	411	233	82	474	38
ON	2,238	1,842	1,881	21	80	10	488	31	87
P	28,874	23,132	18,848	3,184	4,002	821	1,888	488	147
PTH	12,843	10,382	8,882	1,887	2,884	417	301	708	888
PW	1,828	1,728	1,010	248	488	34	101	48	18
QPN	880	334	288	88	12	27	224	88	28
PH	2,081	881	481	17	42	77	1,228	108	100
R	11,138	10,318	7,781	828	1,888	218	114	287	202
TR	1,830	1,448	1,028	184	288	32	12	38	4
OTHER	17,033	8,188	8,788	8,804	2,408	388	1,142	1,182	218
UNSPECIFIED	11,888	11,018	4,848	8,804	888	70	311	174	118
NOT CLASSIFIED	20,828								
INACTIVE	28,744								



TABLE 2  
FEDERAL PHYSICIANS BY SPECIALTY AND ACTIVITY

UNITED STATES AND POSSESSIONS									
SPECIALTY	Total Physicians	MAJOR PROFESSIONAL ACTIVITY							
		Total	PATIENT CARE			OTHER PROFESSIONAL ACTIVITY			
			Office Based Practice	HOSPITAL BASED PRACTICE		Medical Teaching	Adminis- tration	Research	Other
				Residents - All Years	Full-Time Physician Staff				
TOTAL PHYSICIANS	17,787	14,587	732	2,427	11,438	983	1,383	1,079	185
GENERAL PRACTICE	2,048	1,980	248	282	1,440	12	70	8	5
MEDICAL SPEC.	5,802	4,494	207	828	3,658	275	324	888	40
A	29	20	2		18	3	1	5	
CO	388	247	4		243	50	24	73	5
D	275	242	8	72	184	13	7	8	5
GE	207	118	2		118	28	8	54	1
IM	3,552	2,738	103	387	2,248	133	233	424	28
PD	1,046	948	81	188	858	13	28	54	2
PDA	8	7			7	1			
POC	12	8	1		8			3	
PUD	274	187	8		188	38	22	48	1
SURGICAL SPEC.	3,940	3,174	54	808	2,315	118	148	88	14
GS	1,338	1,173	17	288	900	46	78	37	6
NS	95	82	1	18	63	4	4	5	
OSG	688	614	10	178	428	15	20	14	5
OPH	294	282	5	67	190	8	10	15	1
ORS	480	431	8	147	275	15	10	3	1
OTO	238	218	4	67	147	7	8	2	1
PS	58	50	1	7	42	3	1	2	
CRS	13	12			12			1	
TS	102	75	1	7	67	10	12	5	
U	278	287	6	58	183	12	7	2	
OTHER SPEC.	6,400	4,979	223	732	4,024	188	821	318	128
AM	308	184	28	18	183	1	88	9	6
AN	473	418	2	88	330	32	15	6	2
COP	78	84	3	5	58	2	4	5	
OR	372	338	1	117	218	12	6	8	12
FOP	4	2	1	1					
N	338	258	8	33	214	14	18	45	4
ON	120	80	38	2	22	1	47	6	6
P	1,607	1,337	54	88	1,181	32	181	47	10
PTH	889	704	11	103	690	21	45	48	40
PM	220	189	4	3	182	5	16		
OPM	130	80	11	14	38	4	49	14	3
PM	258	70	16	3	51	3	141	28	15
R	814	482	11	38	405	18	15	19	9
TR	51	48	1	6	42		1	1	
OTHER	478	230	21		208	10	148	74	16
UNSPECIFIED	600	548	13	210	328	2	37	9	3

TABLE 3  
FEDERAL AND NON-FEDERAL PHYSICIANS  
BY SPECIALTY AND ACTIVITY

UNITED STATES AND POSSESSIONS									
SPECIALTY	Total Physicians	MAJOR PROFESSIONAL ACTIVITY							
		Total	PATIENT CARE			OTHER PROFESSIONAL ACTIVITY			
			Office Based Practice	HOSPITAL BASED PRACTICE		Medical Teaching	Adminis- tration	Research	Other
				Residents- All Years	Full-Time Physician Staff				
TOTAL PHYSICIANS	487,878	378,812	272,000	62,042	42,470	7,842	12,208	18,377	2,878
GENERAL PRACTICE	80,048	58,833	48,020	8,338	4,274	388	737	85	216
GP	32,518	31,820	28,842		2,278	32	368	35	187
FP	27,830	28,713	18,378	8,338	1,996	356	372	60	48
MEDICAL SPEC.	125,788	108,843	78,080	21,880	11,473	3,184	3,171	8,385	482
A	1,518	1,418	1,371		48	18	16	57	7
CD	9,823	7,788	6,728		1,030	387	232	1,416	58
D	8,880	8,388	4,378	631	347	108	57	120	21
GE	4,048	3,088	2,737		348	188	70	884	8
IN	71,831	62,888	40,817	18,180	8,182	1,480	1,888	4,887	278
PD	28,342	28,438	17,817	8,188	2,782	783	747	1,308	88
POA	481	388	382	8	28	14	4	47	1
POC	888	488	331	15	120	88	28	108	1
PUD	3,718	2,888	2,048		830	232	147	848	20
SURGICAL SPEC.	110,778	108,488	81,831	17,408	7,180	1,348	1,173	1,478	288
GS	34,034	32,887	22,428	7,828	2,838	388	488	484	83
NS	3,341	3,188	2,488	473	287	48	28	82	7
OBG	28,308	28,281	18,813	4,133	1,818	381	388	288	83
OPH	12,874	12,448	10,802	1,308	538	131	88	288	33
ORS	13,888	13,888	10,728	2,080	818	172	81	118	48
OTO	6,883	6,333	8,288	712	388	81	88	80	14
PS	2,880	2,873	2,438	283	172	47	11	42	7
CRS	718	888	887	12	30	2	3	13	2
TS	2,133	1,878	1,804	188	207	37	48	84	7
U	7,743	7,818	8,228	783	824	87	38	71	21
OTHER SPEC.	118,334	101,880	88,888	18,318	18,873	3,032	7,128	4,441	1,883
AM	887	370	178	30	182	7	188	23	22
AN	18,888	14,848	11,338	1,488	2,112	888	170	217	38
CHP	3,271	2,848	1,881	178	808	148	238	207	34
OR	7,048	6,888	4,181	1,343	1,034	181	48	138	137
FOP	240	137	118	8	10	11	28	10	84
N	8,888	4,778	3,283	888	828	247	100	818	43
ON	2,388	1,702	1,887	23	82	11	838	37	73
P	27,481	24,488	18,004	3,282	8,183	883	1,788	833	187
PTH	13,402	11,087	8,883	1,880	3,144	438	848	788	888
PH	2,148	1,827	1,014	282	881	38	117	48	18
OPH	810	384	287	78	48	41	273	73	28
PH	2,318	821	807	20	84	80	1,388	134	118
R	11,883	10,770	7,802	884	2,104	237	128	308	211
TR	1,881	1,488	1,027	170	288	32	13	37	4
OTHER	11,808	8,388	8,780		2,818	388	1,288	1,228	231
UNSPECIFIED	12,288	11,888	4,888	8,714	882	72	348	183	121
NOT CLASSIFIED	20,828								
INACTIVE	28,744								

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## SPECIALTY ABBREVIATIONS

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### GENERAL PRACTICE

GP General Practice\*  
FP Family Practice

### MEDICAL SPECIALTIES

A	Allergy	PD	Pediatrics
CD	Cardiovascular Diseases	PDA	Pediatric Allergy
D	Dermatology	PDC	Pediatric Cardiology
GE	Gastroenterology	PUD	Pulmonary Diseases
IM	Internal Medicine		

### SURGICAL SPECIALTIES

GS	General Surgery	OTO	Otolaryngology
NS	Neurological Surgery	PS	Plastic Surgery
OBG	Obstetrics and Gynecology	CRS	Colon and Rectal Surgery
OPH	Ophthalmology	TS	Thoracic Surgery
ORS	Orthopedic Surgery	U	Urology

### OTHER SPECIALTIES

AM	Aerospace Medicine	PTH	Pathology
AN	Anesthesiology	PM	Physical Medicine and Rehabilitation
CHP	Child Psychiatry	GPM	General Preventive Medicine
DR	Diagnostic Radiology	PH	Public Health
FOP	Forensic Pathology	R	Radiology
N	Neurology	TR	Therapeutic Radiology
OM	Occupational Medicine	OS	Other Specialty
P	Psychiatry	US	Unspecified

A BILL

TO AMEND THE MILITARY SELECTIVE SERVICE ACT, AS AMENDED, TO PROVIDE FOR REGISTRATION AND INDUCTION OF PERSONS IN THE HEALTH OCCUPATIONS, AND FOR OTHER PURPOSES.

BE IT ENACTED BY THE SENATE AND HOUSE OF REPRESENTATIVES OF THE UNITED STATES OF AMERICA IN CONGRESS ASSEMBLED, THAT THIS ACT MAY BE CITED AS THE "HEALTH PERSONNEL MOBILIZATION ACT."

SEC 2. THE MILITARY SELECTIVE SERVICE ACT (50 U.S.C. App. 451-471A) IS AMENDED AS FOLLOWS:

(A) SUBSECTION 3(A) (50 U.S.C. App. 453(A)) IS AMENDED BY —

(1) INSERTING "(1)" BEFORE "EXCEPT";

(2) INSERTING THE FOLLOWING NEW CLAUSE AFTER "HEREAFTER":

"(2) UNDER REGULATIONS PRESCRIBED BY THE PRESIDENT EVERY PERSON TRAINED IN A HEALTH OCCUPATION AND WHO IS A CITIZEN OF THE UNITED STATES OR WHO IS RESIDING IN THE UNITED STATES, MUST PRESENT HIMSELF OR HERSELF FOR AND SUBMIT TO REGISTRATION ON THE DAY OR DAYS FIXED FOR FIRST REGISTRATION OF INDIVIDUALS IN THE HEALTH OCCUPATIONS OF ANY SUBSEQUENT REGISTRATION AT THE TIME, PLACES, AND IN THE MANNER,

DETERMINED BY PROCLAMATION OF THE PRESIDENT AND RULES AND REGULATIONS PRESCRIBED HEREUNDER,"; AND

(3) INSERTING "(3)" BEFORE "THE PROVISIONS".

(P) SECTION 4 (47 U.S.C. App. 454) IS AMENDED BY —

(1) AMENDING SUBSECTION (A) BY STRIKING OUT "SECTION 3" AND BY INSERTING IN PLACE THEREOF "SUBSECTION 3(A)(1)" EACH TIME IT APPEARS;

(2) AMENDING SUBSECTION (P) BY STRIKING OUT "SUBSECTION (A)" AND INSERTING IN PLACE THEREOF "SUBSECTIONS (A) AND (L)"; AND

(3) ADDING THE FOLLOWING NEW SUBSECTIONS AT THE END:

"(L)(1) EVERY PERSON REGISTERED UNDER SUBSECTION 3(A)(2) OF THIS TITLE SHALL BE LIABLE FOR INDUCTION FOR TRAINING AND SERVICE UNDER SUBSECTION (P) OF THIS SECTION AFTER BEING SELECTED UNDER SUBSECTION 5(A) OF THIS TITLE.

"(2) EVERY PERSON INDUCTED UNDER THIS SUBSECTION SHALL BE ASSIGNED TO DUTIES IN PROVIDING HEALTH CARE UNDER REGULATIONS OF THE MILITARY DEPARTMENT INTO WHICH THE PERSON HAS BEEN INDUCTED.

"(3) EACH PERSON REGISTERED UNDER SUBSECTION 3(A)(2) OF THIS TITLE SHALL BE IMMEDIATELY LIABLE FOR CLASSIFICATION AND EXAMINATION AND MAY BE EXAMINED AND CLASSIFIED AT THE TIMES, PLACES, AND IN THE MANNER SET FORTH UNDER REGULATIONS PRESCRIBED BY THE PRESIDENT,

"(4) THE PRESIDENT IS AUTHORIZED, FROM TIME TO TIME, WHETHER OR NOT A STATE OF WAR EXISTS, TO SELECT AND INDUCT INTO THE ARMED FORCES OF THE UNITED STATES FOR TRAINING AND SERVICES SUCH NUMBER OF HEALTH PERSONNEL AS MAY BE REQUIRED TO SATISFY THE HEALTH NEEDS OF THE ARMED FORCES OF THE UNITED STATES.

"(5) A PERSON WHO IS TRAINED IN A HEALTH OCCUPATION WHO HAS FAILED OR REFUSED TO REPORT FOR OR SUBMIT TO INDUCTION SHALL CONTINUE TO REMAIN LIABLE FOR INDUCTION AND WHEN AVAILABLE SHALL BE IMMEDIATELY INDUCTED UNDER REGULATIONS PRESCRIBED BY THE PRESIDENT.

"(6) A PERSON INDUCTED UNDER THIS SUBSECTION MAY BE DEPLOYED OUTSIDE THE UNITED STATES AFTER RECEIVING APPROPRIATE MILITARY TRAINING UNDER REGULATIONS ESTABLISHED BY THE SECRETARY OF DEFENSE, OR, IN THE CASE OF THE COAST GUARD, THE SECRETARY OF TRANSPORTATION, WHEN NOT OPERATING AS PART OF THE NAVY.

"(M)(1) THE PRESIDENT MAY ORDER TO ACTIVE DUTY (OTHER THAN FOR TRAINING), AS DEFINED IN SUBSECTION 101 (??) OF TITLE 10, UNITED STATES CODE, FOR A PERIOD OF NOT MORE THAN TWENTY-FOUR CONSECUTIVE MONTHS, WITH OR WITHOUT THE MEMBER'S CONSENT, ANY MEMBER OF A RESERVE COMPONENT OF THE ARMED FORCES OF THE UNITED STATES WHO IS TRAINED IN A

HEALTH OCCUPATION WHO HAS NOT PERFORMED AT LEAST ONE YEAR OF ACTIVE DUTY (OTHER THAN FOR TRAINING). THIS SUBSECTION DOES NOT AFFECT OR LIMIT THE AUTHORITY TO ORDER MEMBERS OF THE RESERVE COMPONENTS TO ACTIVE DUTY CONTAINED IN SECTION 572 OF TITLE 10, UNITED STATES CODE.

"(2) FOR THE PURPOSE OF COMPUTATION OF THE PERIODS OF ACTIVE DUTY (OTHER THAN FOR TRAINING) REFERRED TO IN CLAUSE (1) OF THIS SUBSECTION, CREDIT SHALL BE GIVEN FOR ALL PERIODS OF ONE DAY OR MORE PERFORMED UNDER COMPETENT ORDERS, EXCEPT THAT NO CREDIT SHALL BE ALLOWED FOR PERIODS SPENT IN STUDENT PROGRAMS PRIOR TO RECEIPT OF THE APPROPRIATE PROFESSIONAL DEGREE OR CERTIFICATE OR THE FIRST YEAR OF INTERNSHIP TRAINING.

"(3) A PERSON TRAINED IN A HEALTH OCCUPATION WHO MEETS THE QUALIFICATIONS FOR A RESERVE COMMISSION IN THE RESPECTIVE MILITARY DEPARTMENT SHALL, SO LONG AS THERE IS A NEED FOR THE SERVICES OF SUCH HEALTH PERSONNEL, BE AFFORDED AN OPPORTUNITY TO VOLUNTEER FOR A PERIOD OF ACTIVE DUTY (OTHER THAN TRAINING) OF NOT LESS THAN TWENTY-FOUR MONTHS. A PERSON TRAINED IN A HEALTH OCCUPATION WHO SO VOLUNTEERS HIS OR HER SERVICE AND MEETS THE QUALIFICATIONS FOR A RESERVE COMMISSION SHALL BE ORDERED TO ACTIVE DUTY (OTHER THAN TRAINING) FOR NOT LESS THAN TWENTY-FOUR MONTHS, NOTWITHSTANDING THE GRADE OR RANK TO WHICH SUCH HEALTH PERSONNEL ARE ENTITLED."

(c) SECTION 5 (50 U.S.C. APP. 455) IS AMENDED BY INSERTING THE FOLLOWING AFTER SUBSECTION (A)(1):

"(2) THE PRESIDENT, UNDER SUCH REGULATIONS AS HE MAY PRESCRIBE, IS AUTHORIZED TO PROVIDE FOR THE SELECTION AND INDUCTION OF HEALTH PERSONNEL REGISTRANTS BY AGE GROUP, HEALTH OCCUPATION, AND SPECIALTY WITHIN THEIR HEALTH OCCUPATION PURSUANT TO REQUISITIONS SUBMITTED BY THE SECRETARY OF DEFENSE.

"(3) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, EXCEPT SECTION 314 OF THE IMMIGRATION AND NATIONALITY ACT (8 U.S.C. 7421), NO REGISTRANT ENGAGED IN THE HEALTH OCCUPATIONS WHO IS LIABLE FOR INDUCTION UNDER SECTION 4 OF THIS TITLE (50 U.S.C. App. 454) SHALL BE HELD TO BE INELIGIBLE FOR APPOINTMENT AS A COMMISSIONED OFFICER OF AN ARMED FORCE OF THE UNITED STATES ON THE SOLE GROUND THAT SUCH AN INDIVIDUAL IS NOT A CITIZEN OF THE UNITED STATES OR HAS NOT MADE A DECLARATION OF INTENT TO BE A CITIZEN THEREOF, AND ANY SUCH PERSON WHO IS NOT A CITIZEN OF THE UNITED STATES AND WHO IS APPOINTED AS A COMMISSIONED OFFICER, MAY IN LIEU OF THE OATH PRESCRIBED BY SECTION 3331 OF TITLE 5 OF THE UNITED STATES CODE, TAKE SUCH OATH OF SERVICE AND OBEDIENCE AS THE SECRETARY OF DEFENSE MAY PRESCRIBE."

(2) . INSERTING THE FOLLOWING NEW SUBSECTION AFTER SUBSECTION (B):

(C) ANY QUALIFIED PERSON WHO --

"(1) IS LIABLE FOR INDUCTION; OR

"(2) AS A MEMBER OF A RESERVE COMPONENT IS



ORDERED TO ACTIVE DUTY IN ANY HEALTH OCCUPATIONAL CATEGORY IN THE ARMED FORCES OF THE UNITED STATES, SHALL, UNDER REGULATIONS PRESCRIBED BY THE SECRETARY OF DEFENSE, BE APPOINTED, REAPPOINTED, OR PROMOTED TO SUCH GRADE OR RANK AS MAY BE COMENSIPATE WITH THE MEMBER'S EDUCATION AND EXPERIENCE, EXCEPT THAT ANY PERSON IN THE HEALTH OCCUPATIONAL CATEGORIES WHO FAILS TO QUALIFY FOR, OR WHO DOES NOT ACCEPT, A COMMISSION OR WHOSE COMMISSION IS TERMINATED MAY BE USED IN AN OCCUPATIONAL CAPACITY IN AN ENLISTED GRADE."

(n) SECTION 6 (50 U.S.C. App. 456) IS AMENDED AS FOLLOWS:

(L) SUBSECTION (A)(1) IS AMENDED BY STRIKING THE THIRD PROVISOR:

(2) SUBSECTION (A)(5) IS AMENDED BY STRIKING OUT "OR" AT THE END OF CLAUSE (C), INSERTING "OR" AT THE END OF CLAUSE (D), AND ADDING THE FOLLOWING NEW CLAUSE AT THE END:

"(E) PERIODS OF ACTIVE DUTY PERFORMED BY HEALTH PERSONNEL PRIOR TO THE RECEIPT OF THE APPROPRIATE PROFESSIONAL DEGREE OR CERTIFICATE OR FIRST YEAR OF INTERN TRAINING.";

(3) SUBSECTION (H) IS AMENDED BY STRIKING OUT "MEDICAL, DENTAL, VETERINARY, OPTOMETRIC, OSTEOPATHIC, SCIENTIFIC, PHARMACEUTICAL, CHIROPRACTIC, CHIROPODICAL," BOTH TIMES IT APPEARS AND INSERTING IN PLACE THEREOF "HEALTH OCCUPATIONAL, SCIENTIFIC,".

(F) THE FOLLOWING NEW SECTION IS ADDED AFTER SECTION 6(50 U.S.C. App. 456):

"SEC. 7. NOTWITHSTANDING SECTION 552A OF TITLE 5, UNITED STATES CODE, OR ANY OTHER LAW, THE PRESIDENT, BY REGULATION, MAY DIRECT ANY PERSON REGISTERED UNDER SECTION 3 OF THIS TITLE TO PROVIDE THE DIRECTOR WITH INFORMATION NEEDED TO DETERMINE THE PERSON'S ABILITIES TO MEET HEALTH NEEDS OF THE ARMED FORCES. THIS INFORMATION MAY INCLUDE, BUT NOT BE LIMITED TO, EDUCATION, TRAINING, OCCUPATIONAL CERTIFICATIONS, LICENSING AND FIELDS OF SPECIALIZATION."

(F) SECTION 10 (50 U.S.C. App. 460) IS AMENDED BY INSERTING THE FOLLOWING NEW SUBSECTION AFTER SUBSECTION (C):

(D) THE PRESIDENT SHALL ESTABLISH A NATIONAL ADVISORY COMMITTEE ON HEALTH OCCUPATIONAL PERSONNEL WHICH SHALL ADVISE ON THE ADMINISTRATION OF THOSE PORTIONS OF THIS ACT PERTAINING TO THE INDUCTION OF HEALTH PERSONNEL. THE MEMBERS OF THE COMMITTEE SHALL BE SELECTED FROM AMONG PERSONS WHO ARE OUTSTANDING IN THE HEALTH OCCUPATIONS.

(G) SUBSECTION 10 (D) (50 U.S.C. App. 460) IS AMENDED BY STRIKING OUT "(D)" AND INSERTING "(E)".

(H) SUBSECTION 12(D) (50 U.S.C. App. 462(D)) IS AMENDED BY STRIKING OUT THE PERIOD AT THE END AND INSERTING THE FOLLOWING IN PLACE THEREOF: ", EXCEPT THAT, IN THE CASE OF A PERSON WHO IS REQUIRED TO

REGISTER UNDER SUBSECTION 3(A)(2) OF THIS TITLE, AN INDICTMENT MUST BE  
FOURD WITHIN FIVE YEARS AFTER THE LAST DAY BEFORE SUCH INDIVIDUAL IS  
REQUIRED TO PERFORM A DUTY TO REGISTER, SUBMIT TO INDUCTION, OR ANY OTHER  
DUTY REQUIRED BY THE MILITARY SELECTIVE SERVICE ACT (50 U.S.C. App.  
451-471A).",

(I) SECTION 16 (50 U.S.C. App. 466) IS AMENDED BY ADDING THE  
FOLLOWING NEW SUBSECTION AT THE END:

"(J) THE TERM 'HEALTH OCCUPATION' MEANS AN OCCUPATION  
CERTIFIED BY THE PRESIDENT AS ESSENTIAL TO MEET THE HEALTH NEEDS OF THE  
ARMED FORCES. THE OCCUPATIONS CERTIFIED MAY INCLUDE:

"(1) PHYSICIANS;

"(2) DENTISTS;

"(3) OPTOMETRISTS

"(4) PHARMACISTS;

"(5) VETERINARIANS;

"(6) PODIATRISTS;

"(7) REGISTERED NURSES; AND

"(2) ANY OTHER FIELD INVOLVING THE PROVISION OF HEALTH CARE DIRECTLY TO HUMANS OR ANIMALS AND WHICH REQUIRES A COURSE OF STUDY AND LICENSING, REGISTRATION, OR CERTIFICATION FROM EITHER A STATE GOVERNMENT OR THE FEDERAL GOVERNMENT.

SEC. 3 SUBSECTION 31(A) OF TITLE 10, UNITED STATES CODE,  
IS AMENDED BY —

(1) STRIKING OUT "MALES" AND INSERTING IN PLACE THEREOF "PERSONS"; AND

(2) STRIKING OUT "AND OF FEMALE CITIZENS OF THE UNITED STATES WHO ARE COMMISSIONED OFFICERS OF THE NATIONAL GUARD."

DRAFT/11/26/82: Insertion of Proposed Amendments Re: Health Care Personnel  
12/1/82: Suggested wording

## MILITARY SELECTIVE SERVICE ACT

(50 U.S.C. App. 451 et seq.)

(Headings in brackets [ ] are not part of the Military Selective Service Act but have been included for the convenience of the reader)

AN ACT To provide for the common defense by increasing the strength of the armed forces of the United States, including the reserve components thereof, and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

### TITLE I [—MILITARY SELECTIVE SERVICE]

#### [SHORT TITLE; POLICY AND INTENT OF CONGRESS]

SECTION 1. [50 U.S.C. App. 451] (a) This Act may be cited as the "Military Selective Service Act."

(b) The Congress hereby declares that an adequate armed strength must be achieved and maintained to insure the security of this Nation.

(c) The Congress further declares that in a free society the obligations and privileges of serving in the armed forces and the reserve components thereof should be shared generally, in accordance with a system of selection which is fair and just, and which is consistent with the maintenance of an effective national economy.

(d) The Congress further declares, in accordance with our traditional military policy as expressed in the National Defense Act of 1916, as amended,<sup>1</sup> that it is essential that the strength and organization of the National Guard, both Ground and Air, as an integral part of the first line defenses of this Nation, be at all times maintained and assured.

To this end, it is the intent of the Congress that whenever Congress shall determine that units and organizations are needed for the national security in excess of those of the Regular components of the Ground Forces and the Air Forces, and those in active service under this title, the National Guard of the United States, both Ground and Air, or such part thereof as may be necessary, together with such units of the Reserve components as are necessary for a balanced force, shall be ordered to active Federal service and continued therein so long as such necessity exists.

(e) The Congress further declares that adequate provision for national security requires maximum effort in the fields of scientific research and development, and the fullest possible utilization of the Nation's technological, scientific, and other critical manpower resources.

(f) The Congress further declares that the Selective Service System should remain administratively independent of any other agency, including the Department of Defense.

SEC. 2. [Repealed by section 53 of the Act of August 10, 1956 (70A Stat. 678)]

<sup>1</sup> National Defense Act of 1916 was repealed by section 53 of the Act of August 10, 1956 (70A Stat. 678).

[REGISTRATION]

Sec. 3(4) [50 U.S.C. App. 453]

(1) Except as otherwise provided in this title, it shall be the duty of every male citizen of the United States, and every other male person residing in the United States, who, on the day or days fixed for the first or any subsequent registration, is between the ages of eighteen and twenty six, to present himself for and submit to registration at such time or times and place or places, and in such manner, as shall be determined by proclamation of the President and by rules and regulations prescribed hereunder.

who, on the day or days fixed for the first or any subsequent registration is between the ages of 18 years and 6 months and 51 years,

(2) Under regulations prescribed by the President, every person trained in a health occupation and who is a citizen of the United States or who is residing in the United States, must present himself or herself for and submit to registration on the day or days fixed for first registration of individuals in the health occupations or any subsequent registration at the time, places, and in the manner, determined by proclamation of the President and rules and regulations prescribed hereunder; (3)

The provisions of this section shall not be applicable to any alien lawfully admitted to the United States as a non-immigrant under section 101(a)(15) of the Immigration and Nationality Act, as amended (66 Stat. 163; 8 U.S.C. 1101), for so long as he continues to maintain a lawful nonimmigrant status in the United States.

"(b) Regulations prescribed pursuant to subsection (a) may require that persons presenting themselves for and submitting to registration under this section provide, as part of such registration, such identifying information (including date of birth, address, and social security account number) as such regulations may prescribe."

[Training and Service in General]

Sec. 4. [50 U.S.C. App. 454] (a) Except as otherwise provided in this title, every person required to register pursuant to

subsection (3) (a) (1)

of this title who is between the ages of eighteen years and six months and twenty-six years, at the time fixed for his registration, or who attains the age of eighteen years and six months after having been required to register pursuant to

subsection 3 (a) (1)

of this title, or who is otherwise liable as provided in section 6(h) of this title, shall be liable for training and service in the Armed Forces of the United States: *Provided*, That each registrant shall be immediately liable for classification and examination, and shall, as soon as practicable following his registration, be so classified and examined, both physically and mentally, in order to determine his availability for induction for training and service in the Armed Forces: *Provided further*, That, notwithstanding any other provision of law, any registrant who has failed or refused to report for induction shall continue to remain liable for induction and when available shall be immediately inducted. The President is authorized, from time to time, whether or not a state of war exists, to select and induct into the Armed Forces of the United States for training and service in the manner provided in this title (including but not limited to selection and induction by age group or age groups) such number of persons as may be required to provide and maintain the strength of the Armed Forces.

At such time as the period of active service in the Armed Forces required under this title of persons who have not attained the nineteenth anniversary of the day of their birth has been reduced or eliminated pursuant to the provisions of section 4(k) of this title,

and except as otherwise provided in this title, every person who is required to register under this title and who has not attained the nineteenth anniversary of the day of his birth on the date such period of active service is reduced or eliminated or who is otherwise liable as provided in section 6(h) of this title, shall be liable for training in the National Security Training Corps: *Provided*, That persons deferred under the provisions of section 6 of this title shall not be relieved for liability for induction into the National Security Training Corps solely by reason of having exceeded the age of nineteen years during the period of such deferment. The President is authorized, from time to time, whether or not a state of war exists, to select and induct for training in the National Security Training Corps as hereinafter provided such number of persons as may be required to further the purposes of this title.

No person shall be inducted into the Armed Forces for training and service or shall be inducted for training in the National Security Training Corps under this title until his acceptability in all respects, including his physical and mental fitness, has been satisfactorily determined under standards prescribed by the Secretary of Defense: *Provided*, That the minimum standards for physical acceptability established pursuant to this subsection shall not be higher than those applied to persons inducted between the ages of 18 and 26 in January 1945: *Provided further*, That the passing requirement for the Armed Forces Qualification Test shall be fixed at a percentile score of 10 points: *And provided further*, That except in time of war or national emergency declared by the Congress the standards and requirements fixed by the preceding two provisions may be modified by the President under such rules and regulations as he may prescribe.

No person shall be inducted for such training and service until adequate provision shall have been made for such shelter, sanitary facilities, water supplies, heating and lighting arrangements, medical care, and hospital accommodations for such persons as may be determined by the Secretary of Defense or the Secretary of Transportation to be essential to the public and personal health.

The persons inducted into the Armed Forces for training and service under this title shall be assigned to stations or units of such forces. Persons inducted into the land forces of the United States pursuant to this title shall be deemed to be members of the Army of the United States; persons inducted into the naval forces of the United States pursuant to this title shall be deemed to be members of the United States Navy or United States Marine Corps or the United States Coast Guard, as appropriate; and persons inducted into the air forces of the United States pursuant to this title shall be deemed to be members of the Air Force of the United States.

Every person inducted into the Armed Forces pursuant to the authority of this subsection after the date of enactment of the 1951 Amendments to the Universal Military Training and Service Act shall, following his induction, be given full and adequate military training for service in the armed force into which he is inducted for a period of not less than twelve weeks, and no such person shall, during this twelve weeks period, be assigned for duty at any installation located on land outside the United States, its Territories and possessions (including the Canal Zone); *Provided*, That no funds appropriated by the Congress shall be used for the purpose of transporting or maintaining in violation of the provisions of this paragraph any person inducted into, or enlisted, appointed, or ordered to active duty in, the Armed Forces under the provisions of this title.

\* No person, without his consent, shall be inducted for training and service in the Armed Forces or for training in the National Security Training Corps under this title, except as otherwise provided herein, after he has attained the twenty-sixth anniversary of the day of his birth.

#### [Length of Service]

(b) Each person inducted into the Armed Forces under the provisions of subsections (a) and (1)

of this section shall serve on active training and service for a period of twenty-four consecutive months, unless sooner released, transferred, or discharged in accordance with procedures prescribed by the Secretary of Defense (or the Secretary of Transportation with respect to the United States Coast Guard) or as otherwise prescribed by subsection (d) of section 4 of this title. The Secretaries of the Army, Navy, and Air Force, with the approval of the Secretary of Defense (and the Secretary of Transportation with respect to the United States Coast Guard), may provide, by regulations which shall be as nearly uniform as practicable, for the release from training and service in the armed forces prior to serving the periods required by this subsection of individuals who volunteered for and are accepted into organized units of the Army National Guard and Air National Guard and other reserve components.

#### [Enlistment; Reservists' Active Duty; Volunteers for Inductions; N.S.T.C.]

(c)(1) Under the provisions of applicable laws and regulations any person between the ages of eighteen years and six months and twenty-six years shall be offered an opportunity to enlist in the regular army for a period of service equal to that prescribed in subsection (b) of this section: *Provided*, That, notwithstanding the provisions of this or any other Act, any person so enlisting shall not have his enlistment extended without his consent until after a declaration of war or national emergency by the Congress after the date of enactment of the 1951 Amendments to the Universal Military Training and Service Act.

(2) Any enlisted member of any reserve component of the Armed Forces may, during the effective period of this Act, apply for a period of service equal to that prescribed in subsection (b) of this section and his application shall be accepted: *Provided*, That his services can be effectively utilized and that his physical and mental fitness for such service meet the standards prescribed by the head of the department concerned: *Provided further*, That active service performed pursuant to this section shall not prejudice his status as such member of such reserve component: *And provided further*,

\* Former undesignated paragraph preceding this paragraph terminated as of July 1, 1972, pursuant to section 9 of Public Law 92-62, June 27, 1971 (71 Stat. 208), as last amended by section 103 of Public Law 92-129, September 28, 1971 (86 Stat. 358).



That any person who was a member of a reserve component on June 25, 1950, and who thereafter continued to serve satisfactorily in such reserve component, shall, if his application for active duty made pursuant to this paragraph is denied, be deferred from induction under this title until such time as he is ordered to active duty or ceases to serve satisfactorily in such reserve component.

(3) Within the limits of the quota determined under section 5(b) for the subdivision in which he resides, any person, between the ages of eighteen and twenty-six, shall be afforded an opportunity to volunteer for induction into the Armed Forces of the United States for the training and service prescribed in subsection (b), but no person who so volunteers shall be inducted for such training and service so long as he is deferred after classification.

(4) Within the limits of the quota determined under section 5(b) for the subdivision in which he resides, any person after attaining the age of seventeen shall with the written consent of his parents or guardian be afforded an opportunity to volunteer for induction into the Armed Forces of the United States for the training and service prescribed in subsection (b).

(5) Within the limits of the quota determined under section 5(b) for the subdivision in which he resides, at such time as induction into the National Security Training Corps is authorized pursuant to the provisions of this title, any person after attaining the age of seventeen shall with the written consent of his parents or guardian be afforded an opportunity to volunteer for induction into the National Security Training Corps for the training prescribed in subsection (k) of section 4 of this title.

#### [Transfer to Reserve Component; Period of Service]

(d)(1) Each person who hereafter and prior to the enactment of the 1951 Amendments to the Universal Training and Service Act is inducted, enlisted, or appointed and serves for a period of less than three years in one of the armed forces and meets the qualifications for enlistment or appointment in a reserve component of the armed force in which he serves, shall be transferred to a reserve component of such armed force, and until the expiration of a period of five years after such transfer, or until he is discharged from such reserve component, whichever occurs first, shall be deemed to be a member of such reserve component and shall be subject to such additional training and service as may now or hereafter be prescribed by law for such reserve component: *Provided*, That any such person who completes at least twenty-one months of service in the armed forces and who thereafter serves satisfactorily (1) on active duty in the armed forces under a voluntary extension for a period of at least one year, which extension is hereby authorized, or (2) in an organized unit of any reserve component of any of the armed forces for a period of at least thirty-six consecutive months, shall except in time of war or national emergency declared by the Congress, be relieved from any further liability under this subsection to serve in any reserve component of the armed forces of the United States, but nothing in this subsection shall be construed to prevent any such person, while in a reserve component of such forces, from being ordered or called to active duty in such forces.

(2) Each person who hereafter and prior to the enactment of the 1951 Amendments to the Universal Military Training and Service Act is enlisted under the provisions of subsection (g) of this section<sup>3</sup> and who meets the qualifications for enlistment or appointment in a reserve component of the armed forces shall, upon discharge from such enlistment under honorable conditions, be transferred to a reserve component of the armed forces of the United States and shall serve therein for a period of six years or until sooner discharged. Each such person shall, so long as he is a member of such reserve component, be liable to be ordered to active duty, but except in time of war or national emergency declared by the Congress no such person shall be ordered to active

duty, without his consent and except as hereinafter provided, for more than one month in any year. In case the Secretary of the Army, the Secretary of the Navy, or the Secretary of the Air Force determines that enlistment, enrollment, or appointment in, or assignment to, an organized unit of a reserve component or an officers' training program of the armed force in which he served is available to, and can without undue hardship be filled by, any such person, it shall be the duty of such person to enlist, enroll, or accept appointment in, or accept assignment to, such organized unit or officers' training program and serve satisfactorily therein for a period of four years. Any such person who fails or refuses to perform such duty may be ordered to active duty, without his consent, for an additional period of not more than twelve consecutive months. Any such person who enlists or accepts appointment in any such organized unit and serves satisfactorily therein for a period of four years shall, except in time of war or national emergency declared by the Congress, be relieved from any further liability under this subsection to serve in any reserve component of the armed forces of the United States, but nothing in this subsection shall be construed to prevent any such person, while in a reserve component of such forces, from being ordered or called to active duty in such forces. The Secretary of Defense is authorized to prescribe regulations governing the transfer of such persons within and between reserve components of the armed forces and determining, for the purpose of the requirements of the foregoing provisions of this paragraph, the credit to be allowed any person so transferring for his previous service in one or more reserve components.

(3) Each person who, subsequent to June 19, 1951, and on or before August 9, 1955, is inducted, enlisted, or appointed, under any provision of law, in the Armed Forces, including the reserve components thereof, or in the National Security Training Corps, prior to attaining the twenty-sixth anniversary of his birth, shall be required to serve on active training and service in the Armed Forces or in training in the National Security Training Corps, and in a reserve component, for a total period of eight years, unless sooner discharged on the grounds of personal hardship, in accordance with regulations and standards prescribed by the Secretary of Defense (or the Secretary of Transportation with respect to the United States Coast Guard). Each such person, on release from active training and service in the Armed Forces or from training in the National Security Training Corps, if physically and mentally qualified, shall be transferred to a reserve component of the Armed Forces, and shall serve therein for the remainder of the period which he is required to serve under this paragraph and shall be deemed to be a member of the reserve component during that period. If the Secretary of the Army, the Secretary of the Navy, or the Secretary of the Air Force, or the Secretary of Transportation with respect to the United States Coast Guard, determines that enlistment, enrollment, or appointment in, or assignment to, an organized unit of a reserve component or an officers' training program of the armed force in which he served is available to, and can, without undue personal hardship, be filled by such person, that person, that person shall enlist, enroll, or accept appointment in, or accept assignment to, the organized unit or officers' training program, and serve satisfactorily therein.

#### [Pay and Allowances]

(e) With respect to the persons inducted for training and service under this title there shall be paid, allowed, and extended the same pay, allowances, pensions, disability and death compensation, and other benefits as are provided by law in the case of other enlisted men of like grades and length of service of that component of the armed forces to which they are assigned. Section 3 of the Act of July 25, 1947 (Public Law 239, Eightieth Congress), is hereby amended by deleting therefrom the following: "Act of March 7, 1942 (56 Stat. 143-148, ch. 166), as amended". The Act of March 7, 1942 (56 Stat. 143-148), as amended,<sup>4</sup> is hereby made applicable to persons inducted into the armed forces pursuant to this title.

**[Civilian Compensation]**

(f) Notwithstanding any other provision of law, any person who is inducted into the armed forces under this Act and who, before being inducted, was receiving compensation from any person may, while serving under that induction, receive compensation from that person.

**[National Security Council]**

(g) The National Security Council shall periodically advise the Director of the Selective Service System and coordinate with him the work of such State and local volunteer advisory committees which the Director of Selective Service may establish, with respect to the identification, selection, and deferment of needed professional and scientific personnel and those engaged in, and preparing for, critical skills and other essential occupations. In the performance of its duties under this subsection the National Security Council shall consider the needs of both the Armed Forces and the civilian segment of the population.

(h) [Repealed by section 1(h) of the Act of June 19, 1951 (65 Stat. 80)]

(i) [Subsection (i) terminated as of July 1, 1957, pursuant to section 7 of the Act of September 9, 1950 (64 Stat. 828), as last amended by section 8 of Public Law 85-62, June 27, 1957 (71 Stat. 208)]

(j) [Subsection (j) terminated as of July 1, 1973, pursuant to section 9 of Public Law 85-62, June 27, 1957 (71 Stat. 208), as last amended by section 103 of Public Law 92-129, September 28, 1971 (85 Stat. 355)]

**[Reduction in Period of Service; Operation of National Security Training Commission and Corps]**

(k)(1) Upon a finding by him that such action is justified by the strength of the Armed Forces in the light of international conditions, the President, upon recommendation of the Secretary of Defense, is authorized, by Executive order, which shall be uniform in its application to all persons inducted under this title but which may vary as to age groups, to provide for (A) decreasing periods of service under this title but in no case to a lesser period of time than can be economically utilized, or (B) eliminating periods of service required under this title.

(2) Whenever the Congress shall by concurrent resolution declare—

(A) that the period of active service required of any age group or groups of persons inducted under this title should be decreased to any period less than twenty-four months which may be designated in such resolution; or

(B) that the period of active service required of any age group or groups of persons inducted under this title should be eliminated,

the period of active service in the Armed Forces of the age group or groups designed in any such resolution shall be so decreased or eliminated, as the case may be. Whenever the period of active service required under this title of persons who have not attained the nineteenth anniversary of the day of their birth has been reduced or eliminated by the President or as a result of the adoption of a concurrent resolution of the Congress in accordance with the foregoing provision of this section, all individuals then or thereafter liable for registration under this title who on that date have not attained the nineteenth anniversary of the day of their birth and have not been inducted into the Armed Forces shall be liable, effective on such date, for induction into the National Security Training Corps as hereinafter established for initial military training for a period of six months.

(3) [Repealed by section 8(a) of Public Law 89-554, September 6, 1966 (80 Stat. 656)]

(4) [Repealed by section 8(a) of Public Law 89-554, September 6, 1966 (80 Stat. 656)]

(5) The Commission<sup>\*</sup> shall, subject to the direction of the President, exercise general supervision over the training of the National Security Training Corps, which training shall be basic military training. The Commission shall establish such policies and standards with respect to the conduct of the training of members of the National Security Training Corps as are necessary to carry out the purposes of this Act. The Commission shall make adequate provisions for the moral and spiritual welfare of members of the National Security Training Corps. The Secretary of Defense shall designate the military departments to carry out such training. Each military department so designated shall carry out such military training in accordance with the policies and standards of the Commission. The military department or departments so designated to carry out such military training shall, subject to the approval of the Secretary of Defense, and subject to the policies and standards established by the Commission, determine the type or types of basic military training to be given to members of the National Security Training Corps.

(6) [Repealed by section 8(a) of Public Law 89-554, September 6, 1966 (80 Stat. 656)]

(7) Not later than four months following confirmation of the members of the Commission, the Commission shall submit to the Congress legislative recommendations which shall include, but not be limited to—

(A) a broad outline for a program deemed by the Commission and approved by the Secretary of Defense to be appropriate to assure that the training carried out under the provisions of this Act shall be of a military nature, but nothing contained in this paragraph shall be construed to grant to the Commission the authority to prescribe the basic type or types of military training to be given members of the National Security Training Corps;

(B) measures for the personal safety, health, welfare and morals of members of the National Security Training Corps;

(C) a code of conduct, together with penalties for violation thereof;

(D) measures deemed necessary to implement the policies and standards established under the provisions of paragraph (5) of this subsection; and

(E) disability and death benefits and other benefits, and the obligations, duties, liabilities, and responsibilities, to be granted to or imposed upon members of the National Security Training Corps.

All legislative recommendations submitted under this paragraph shall be referred to the Committees on Armed Services of the two Houses, and each of such committees shall, not later than the expiration of the first period of 45 calendar days of continuous sessions of the Congress, following the date on which the recommendations provided for in this paragraph are transmitted to the Congress, report thereon to its House: *Provided*, That any bill or resolution reported with respect to such recommendations shall be privileged and may be called up by any member of either House but shall be subject to amendments as if it were not so privileged.

(8) No person shall be inducted into the National Security Training Corps until after—

(A) a code of conduct, together with penalties for violation thereof, and measures providing for disability and death benefits have been enacted into law; and

(B) such other legislative recommendations as are provided for in paragraph (7) shall have been considered and such recommendations or any portion thereof shall have been enacted with or without amendments into law; and

(C) the period of service required under this title of persons who have not attained the nineteenth anniversary of the day of their birth has been reduced or eliminated by the President or as a result of the adoption of a concurrent resolution of the Congress in accordance with paragraph (2) of this subsection.

<sup>\*</sup> Reference is to the National Security Training Commission, which expired June 30, 1957.

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(9) Six months following the commencement of induction of persons into the National Security Training Corps, and semiannually thereafter, the Commission shall submit to the Congress a comprehensive report describing in detail the operation of the National Security Training Corps, including the number of persons inducted therein, a list of camps and stations at which training is being conducted, a report on the number of deaths and injuries occurring during such training and the causes thereof, an estimate of the performance of the persons inducted therein, including an analysis of the disciplinary problems encountered during the preceding six months, the number of civilian employees of the Commission and the administrative costs of the Commission. Simultaneously, there shall be submitted to the Congress by the Secretary of Defense a report setting forth an estimate of the value of the training conducted during the preceding six months, the cost of the training program chargeable to the appropriations made to the Department of Defense, and the number of personnel of the Armed Forces directly engaged in the conduct of such training.

(10) Each person inducted into the National Security Training Corps shall be compensated at the monthly rate of \$30: *Provided, however, That each such person, having a dependent or dependents as such terms are defined in the Career Compensation Act of 1949,\* shall be entitled to receive a dependency allowance equal to the sum of the basic allowance for quarters provided for persons in pay grade E-1 by section 302(f) of the Career Compensation Act of 1949 as amended by section 3 of the Dependents' Assistance Act of 1950 as may be extended or amended plus \$40 so long as such person has in effect an allotment equal to the amount of such dependency allowance for the support of the dependent or dependents on whose account the allowance is claimed.*

(11) No person inducted into the National Security Training Corps shall be assigned for training at an installation located on land outside the continental United States, except that residents of Territories and possessions of the United States may be trained in the Territory or possession from which they were inducted.

required to register pursuant to

*who is between the ages of 18 years and 51 years, at the time fixed for his or her registration, or who attains the age of 18 years and six months after having been required to register pursuant to subsection 3(a)(2) of this title,*

(1) Every person <sup>Set F</sup> ~~registered~~ under subsection

3(a)(2) of this title shall be liable for induction for training and service under subsection (b) of this section after being selected under subsection 5(a) of this title.

(2) Every person inducted under this subsection shall be assigned to duties in providing health care under regulations of the military department into which the person has been inducted.

(3) Each person registered under subsection 3(a)(2) of this title shall be immediately liable for classification and examination and may be examined and classified at the times, places, and in the manner set forth under regulations prescribed by the

DRAFT: Suggested wording

(4) The President is authorized, from time to time, whether or not a state of war exists, to select and induct into the Armed Forces of the United States for training and services such number of health personnel as may be required to satisfy the health needs of the Armed Forces of the United States.

(5) A person who is trained in a health occupation who has failed or refused to report for or submit to induction shall continue to remain liable for induction and when available shall be immediately inducted under regulations prescribed by the President.

Notwithstanding Sec. 671 of  
Title 10, U.S.C., a

(6) A person inducted under this subsection may be deployed outside the United States after receiving appropriate military training under regulations established by the Secretary of Defense, or, in the case of the Coast Guard, the Secretary of Transportation, when not operating as part of the Navy.

(m)(1) The President may order to active duty (other than for training), as defined in subsection 101 (22) of title 10, United States Code, for a period of not more than twenty-four consecutive months, with or without the member's consent, any member of a reserve component of the Armed Forces of the United States who is trained in a health occupation who has not performed at least one year of active duty (other than for training). This subsection does not affect or limit the authority to order members of the reserve components to active duty contained in section 872 of title 10, United States Code.

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under any other provision  
of law.

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(2) For the purpose of computation of the periods of active duty (other than for training) referred to in clause (1) of this subsection, credit shall be given for all periods of one day or more performed under competent orders, except that no credit shall be allowed for periods spent in student programs prior to receipt of the appropriate professional degree or certificate of the first year of internship training.

(3) A person trained in a health occupation who meets the qualifications for a reserve commission in the respective military department shall, so long as there is a need for the services of such health personnel, be afforded an opportunity to volunteer for a period of active duty (other than training) of not less than twenty-four months. A person trained in a health occupation who so volunteers his or her service and meets the qualifications for a reserve commission shall be ordered to active duty (other than training) for not less than twenty-four months, notwithstanding the grade or rank to which such health personnel is entitled.

military health occupation

warrant or enlisted grade

a person in a specific health occupation,

service

SELECTION

[Manner of Selection for Training and Service]

SEC. 5. [50 U.S.C. App. 455] (a)(1) The selection of persons for training and service under section 4 shall be made in an impartial manner, under such rules and regulations as the President may prescribe, from the persons who are liable for such training and service and who at the time of selection are registered and classified, but not deferred or exempted: *Provided*, That in the selection of persons for training and service under this title, and in the interpretation and execution of the provisions of this title, there shall be no discrimination against any person on account of race or color: *Provided further*, That in the classification of registrants within the jurisdiction of any local board, the registrants of any particular registration may be classified, in the manner prescribed by and in accordance with rules and regulations prescribed by the President, before, together with, or after the registrants of any prior registration or registrations; and in the selection for induction of persons within the jurisdiction of any local board and within any particular classification, persons who were registered at any particular registration may be selected, in the manner prescribed by and in accordance with rules and regulations prescribed by the President, before, together with, or after persons who were registered at any prior registration or registrations: [And provided further, That nothing herein shall be construed to prohibit the selection or induction of persons by age group or groups under rules and regulations prescribed by the President:] ' And provided further, That—

(1) no local board shall order for induction for training and service in the Armed Forces of the United States any person who has not attained the age of nineteen unless there is not within the jurisdiction of such local board a sufficient number of persons who are deemed by such local board to be available for induction and who have attained the age of nineteen to enable such local board to meet a call for men which it has been ordered to furnish for induction;

(2) no local board shall order for induction for training and service in the Armed Forces of the United States any person who has not attained the age of nineteen, if there is any person within the jurisdiction of such local board who (i) is as much as ninety days older, (ii) has not attained the age of nineteen, and (iii) is deemed by the local board to be available for induction; and

(3) no local board shall order for induction for training and service in the Armed Forces of the United States an alien unless such alien shall have resided in the United States for one year.

(2) The President, under such regulations as he may prescribe, is authorized to provide for the selection and induction of health personnel registrants by age group, health occupation, and specialty within their health occupation pursuant to requisitions submitted by the Secretary of Defense.

(3) Notwithstanding any other provision of law, except 314 of the Immigration and Nationality Act (8 U.S.C. 1424), no registrant engaged in the health occupations who is liable for induction under section 4

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trained

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or warrant

of this title (50 U.S.C App. 454) shall be held to be ineligible for appointment as a commissioned officer of an Armed Force of the United States on the sole ground that such an individual is not a citizen of the United States or has not made a declaration of intent to be a citizen thereof, and any such person who is not a citizen of the United States and who is appointed as a commissioned officer, may in lieu of the oath prescribed by section 3331 of title 5 of the United States Code, take such oath of service and obedience as the Secretary of Defense may prescribe.

[Quotas]

(b) Quotas of men to be inducted for training and service under this title shall be determined for each State, Territory, possession, and the District of Columbia, and for subdivisions thereof, on the basis of the actual number of men in the several States, Territories, possessions, and the District of Columbia, and the subdivisions thereof, who are liable for such training and service but who are not deferred after classification, except that credits shall be given in fixing such quotas for residents of such subdivisions who are in the armed forces of the United States on the date fixed for determining such quotas. After such quotas are fixed, credits shall be given in filling such quotas for residents of such subdivision who subsequently become members of such forces. Until the actual numbers necessary for determining the quotas are known, the quotas may be based on estimates, and subsequent adjustments therein shall be made when such actual numbers are known. All computations under this subsection shall be made in accordance with such rules and regulations as the President may prescribe.

who volunteers under subsection 4(m)(3) of this title; or

(c) Any qualified person who —

(1) is liable for induction; or

(2) as a member of a reserve component is

ordered to active duty in any health occupational category in the Armed Forces of the United States, shall, under regulations prescribed by the Secretary of Defense, be appointed, reappointed, or promoted to such grade of rank as may be commensurate with the member's education and experience, except that any person in the health occupational categories who fails

warrant or

to qualify for, or who does not accept, a commission or

or warrant

whose commission is terminated may be used in

and

occupational capacity in an enlisted grade.

#### [Random Selection]

(d) Whenever the President has provided for the selection of persons for training and service in accordance with random selection under subsection (a) of this section, calls for induction may be placed under such rules and regulations as he may prescribe, notwithstanding the provisions of subsection (b) of this section.

#### [Limitation on Number of Inductees]

(e) Notwithstanding any other provision of this Act, not more than 130,000 persons may be inducted into the Armed Forces under this Act in the fiscal year ending June 30, 1972, and not more than 140,000 in the fiscal year ending June 30, 1973, unless a number greater than that authorized in this subsection for such fiscal year or years is authorized by a law enacted after the date of enactment of this subsection.

#### DEFERMENT AND EXEMPTIONS

##### [Exemptions from Registration and Service]

Sec. 6. [50 U.S.C. App. 456] (a)(1) Commissioned officers, warrant officers, pay clerks, enlisted men, and aviation cadets of the Regular Army, the Navy, the Air Force, the Marine Corps, the Coast Guard, and the Environmental Science Services Administration; cadets, United States Military Academy, midshipmen, United States Naval Academy, cadets, United States Air Force Academy, cadets, United States Coast Guard Academy, midshipmen, Merchant Marine Reserve, United States Naval Reserves; students enrolled in an officer procurement program at military colleges the curriculum of which is approved by the Secretary of Defense; members of reserve components of the Armed Forces, and the Coast Guard, while on active duty; and foreign diplomatic representatives, technical attachés of foreign embassies and legations, consuls general, consuls, vice consuls and other consular agents of foreign countries who are not citizens of the United States, and members of their families, and persons in other categories to be specified by the President who are not citizens of the United States, shall not be required to be registered under section 3 and shall be relieved from liability for training and service under section 4, except that aliens admitted for permanent residence in the United States shall not be so exempted: *Provided*, That any alien lawfully admitted for permanent residence as defined in paragraph (20) of section 101(a) of the Immigration and Nationality Act, as amended (66 Stat. 163, 8 U.S.C. 1101), and who by reason of occupational status is subject to adjustment to nonimmigrant status under paragraph (15)(A), (15)(E), or (15)(G) of such section 101(a) but who executes a waiver in accordance with section 247(b) of that Act of all rights, privileges, exemptions, and immunities which would otherwise accrue to him as a result of that occupational status, shall be subject to registration under section 3 of this Act, but shall be deferred from induction for training and service for so long as such occupational status continues. Any person who subsequent to June 24, 1948, serves on active duty for a period of not less than twelve months in the armed forces of a nation with which the United States is associated in mutual defense activities as defined by the President, may be exempted from training and service, but not from registration, in accordance with regulations prescribed by the President, except that no such exemption shall be granted to any person who is a national of a country which does not grant reciprocal privileges to citizens of the United States: *Provided*, That any

active duty performed prior to June 24, 1948, by a person in the armed forces of a country allied with the United States during World War II and with which the United States is associated in such mutual defense activities, shall be credited in computation of such twelve-month period.

(2) Commissioned officers of the Public Health Service and members of the Reserve of the Public Health Service while on active duty and assigned to staff the various offices and bureaus of the Public Health Service, including the National Institutes of Health, or assigned to the Coast Guard, the Bureau of Prisons, Department of Justice, Environmental Protection Agency, or the Environmental Science Services Administration, or who are assigned to assist Indian tribes, groups, bands, or communities pursuant to the Act of August 5, 1954 (68 Stat. 674), as amended, shall not be required to be registered under section 3 and shall be relieved from liability for training and service under section 4. Notwithstanding the preced-

ing sentence, commissioned officers of the Public Health Service and members of the Reserve of the Public Health Service who, prior to the enactment of this paragraph, had been detailed or assigned duty other than that specified in the preceding sentence shall not be required to be registered under section 3 and shall be relieved from liability for training and service under section 4.

#### [Veterans Exemptions]

(b)(1) No person who served honorably on active duty between September 16, 1940, and the date of enactment of this title for a period of twelve months or more, or between December 7, 1941, and September 2, 1945, for a period in excess of ninety days, in the Army, the Air Force, the Navy, the Marine Corps, the Coast Guard, the Public Health Service, or the armed forces of any country allied with the United States in World War II prior to September 2, 1945, shall be liable for induction for training and service under this title, except after a declaration of war or national emergency made by the Congress subsequent to the date of enactment of this title.

(2) No person who served honorably on active duty between September 16, 1940, and the date of enactment of this title for a period of ninety days or more but less than twelve months in the Army, the Air Force, the Navy, the Marine Corps, the Coast Guard, the Public Health Service, or the armed forces of any country allied with the United States in World War II prior to September 2, 1945, shall be liable for induction for training and service under this title, except after a declaration of war or national emergency made by the Congress subsequent to the date of enactment of this title, if—

(A) the local board determined that he is regularly enlisted or commissioned in any organized unit of a reserve component of the armed force in which he served, provided such unit is reasonably accessible to such person without unduly interrupting his normal pursuits and activities (including attendance at a college or university in which he is regularly enrolled), or in a reserve component (other than in an organized unit) of such armed force in any case in which enlistment or commission in an organized unit of a reserve component of such armed force is not available to him; or

(B) the local board determines that enlistment or commission in a reserve component or such armed force is not available to him or that he has voluntarily enlisted or accepted appointment in an organized unit of a reserve component of an armed force other than the armed force in which he served.

Nothing in this paragraph shall be deemed to be applicable to any person to whom paragraph (1) of this subsection is applicable.

(3) Except as provided in section 5(a) of this Act, and notwithstanding any other provision of this Act, no persons who (A) has served honorably on active duty after September 16, 1940, for a period of not less than one year in the Army, the Air Force, the Navy, the Marine Corps, or the Coast Guard, or (B) subsequent to September 16, 1940, was discharged for the convenience of the Government after having served honorably on active duty for a period of not less than six months in the Army, the Air Force, the Navy,

the Marine Corps, or the Coast Guard, or (C) has served for a period of not less than twenty-four months (i) as a commissioned officer in the Public Health Service or (ii) as a commissioned officer in the Coast and Geodetic Survey, shall be liable for induction for training and service under this Act, except after a declaration of war or national emergency made by the Congress subsequent to the date of enactment of this title.

(4) No person who is honorably discharged upon the completion of an enlistment pursuant to section 4(c) shall be liable for induction for training and service under this title, except after a declaration of war or national emergency made by the Congress subsequent to the date of enactment of this title.

(5) For the purposes of computation of the periods of active duty referred to in paragraphs (1), (2), or (3) of this subsection, no credit shall be allowed for—

(A) periods of active duty training performed as a member of a reserve component pursuant to an order or call to active duty solely for training purposes;

(B) periods of active duty in which the service consisted solely of training under the Army specialized training program, the Army Air Force college training program, or any similar program under the jurisdiction of the Navy, Marine Corps, or Coast Guard;

(C) periods of active duty as a cadet at the United States Military Academy or United States Coast Guard Academy, or as a midshipman at the United States Naval Academy, or in a preparatory school after nomination as a principal, alternate, or candidate for admission to any of such academies; or

(D) periods of active duty in any of the armed forces while being processed for entry into or separation from any educational program or institution referred to in paragraphs (B) or

(C), or

(E) periods of active duty performed by health personnel prior to the receipt of the appropriate professional degree or certificate of first year of intern training.

#### [Reserve Components Exemptions]

(c)(1) Persons who, on February 1, 1951, were members of organized units of the federally recognized National Guard, the federally recognized Air National Guard, the Officers' Reserve Corps, the Regular Army Reserve, the Air Force Reserve, the Enlisted Reserve Corps, the Naval Reserve, the Marine Corps Reserve, the Coast Guard Reserve, or the Public Health Service Reserve, shall, so long as they continue to be such members and satisfactorily participate in scheduled drills and training periods as prescribed by the Secretary of Defense, be exempt from training and service by induction under the provisions of this title, but shall not be exempt from registration unless on active duty.

(2)(A) Any person, other than a person referred to in subsection (d) of this section, who—

(i) prior to the issuance of orders for him to report for induction; or

(ii) prior to the date scheduled for his induction and pursuant to a proclamation by the Governor of a State to the effect that the authorized strength of any organized unit of the National Guard of that State can not be maintained by the enlistment or appointment of persons who have not been issued orders to report for induction under this title; or

(iii) prior to the date scheduled for his induction and pursuant to a determination by the President that the strength of the Ready Reserve of the Army Reserve, Naval Reserve, Marine Corps Reserve, Air Force Reserve, or Coast Guard Reserve cannot be maintained by the enlistment or appointment of persons who have not been issued orders to report for induction, under this title;

enlists or accepts appointment, before attaining the age of 26 years, in the Ready Reserve of any Reserve component of the Armed Forces, the Army National Guard, or the Air National Guard, shall be deferred from training and service under this title so long as he serves satisfactorily as a member of an organized unit of such Reserve or National Guard in accordance with section 270 of title 10 or section 502 of title 32, United States Code, as the case may be, or satisfactorily performs such other Ready Reserve service as may be prescribed by the Secretary of Defense. Enlistments or appointments under subparagraphs (ii) and (iii) of this clause may be accepted notwithstanding the provisions of section 15(d) of this title. Notwithstanding the provisions of subsection (h) of this section, no person deferred under this clause who has completed six years of such satisfactory service as a member of the Ready Reserve or National Guard, and who during such service has performed active duty for training with an armed force for not less than twelve consecutive weeks shall be liable for induction for training and service under this Act, except after a declaration of war or national emergency made by the Congress after August 9, 1955. In no event shall the number of enlistments or appointments made under authority of this paragraph in any fiscal year in any Reserve component of the Armed Forces or in the Army National Guard or the Air National Guard cause the personnel strength of such Reserve component or the Army National Guard or the Air National Guard, as the case may be, to exceed the personnel strength for which funds have been made available by the Congress for such fiscal year.

(B) A person who, under any provision of law, is exempt or deferred from training and service under this Act by reason of membership in a reserve component, the Army National Guard, or the Air National Guard, as the case may be, shall, if he becomes a member of another reserve component, the Army National Guard, or the Air National Guard, as the case may be, continue to be exempt or deferred to the same extent as if he had not become a member of another reserve component, the Army National Guard, or the Air National Guard, as the case may be, so long as he continues to serve satisfactorily.

(C) Except as provided in subsection (b) and the provisions of this subsection, no person who becomes a member of a reserve component after February 1, 1951, shall thereby be exempt from registration or training and service by induction under the provisions of this Act.

(D) Notwithstanding any other provision of this Act, the President, under such rules and regulations as he may prescribe, may provide that any person enlisted or appointed after October 4, 1961, in the Ready Reserve of any reserve component of the Armed Forces (other than under section 511(b) of title 10, United States Code), the Army National Guard, or the Air National Guard, prior to attaining age of twenty six years, or any person enlisted or appointed in the Army National Guard or the Air National Guard or enlisted in the Ready Reserve of any reserve component prior to attaining the age of eighteen years and six months and deferred under the prior provisions of this paragraph as amended by the Act of October 4, 1961, Public Law 87-378 (75 Stat. 807), or under section 262 of the Armed Forces Reserve Act of 1952, as amended,\* who fails to serve satisfactorily during his obligated period of service as a member of such Ready Reserve or National Guard or the Ready Reserve of another reserve component or the National Guard of which he becomes a member, may be selected for training and service and inducted into the armed forces of

[Officers' Training; Deferment of Students Authorized]

(d)(1) Within such numbers as may be prescribed by the Secretary of Defense, any person who (A) has been or may hereafter be selected for enrollment or continuance in the senior division, Reserve Officers' Training Corps, or the Air Reserve Officers' Training Corps, or the Naval Reserve Officers' Training Corps, or the naval and Marine Corps officer candidate training program established by the Act of August 13, 1946 (60 Stat. 1057), as amended,<sup>9</sup> or the Reserve officers' candidate program of the Navy, or the platoon leaders' class of the Marine Corps, or the officer recruitment programs of the Coast Guard and the Coast Guard Reserve, or appointed an ensign, United States Naval Reserve, while undergoing professional training; (B) agrees, in writing, to accept a commission, if tendered, and to serve, subject to order of the Secretary of the military department having jurisdiction over him (or the Secretary of Transportation with respect to the United States Coast Guard), not less than two years on active duty after receipt of a commission; and (C) agrees to remain a member of a regular or reserve component until the eighth anniversary of the receipt of a commission in accordance with his obligation under the first sentence of section 651 of title 10, United States Code, or until the sixth anniversary of the receipt of a commission in accordance with his obligation under the second sentence of section 651 of title 10, United States Code, shall be deferred from induction under this title until after completion or termination of the course of instruction and so long as he continues in a regular or reserve status upon being commissioned, but shall not be exempt from registration. Such persons, except those persons who have previously completed an initial period of military training or an equivalent period of active military training and service, shall be required while enrolled in such programs to complete a period of training equal (as determined under regulation approved by the Secretary of Defense or the Secretary of Transportation with respect to the United States Coast Guard) in duration and type of training to an initial period of military training. There shall be added to the obligated active commissioned service of any person who has agreed to perform such obligatory service in return for financial assistance while attending a civilian college under any such training program a period of not to exceed one year. Except as provided in paragraph (5), upon the successful completion by any person of the required course of instruction under any program listed in clause (A) of the first sentence of this paragraph, such person shall be tendered a commission in the appropriate reserve component of the Armed Forces if he is otherwise qualified for such appointment. If, at the time of, or subsequent to, such appointment, the armed force in which such person is commissioned does not require his service on active duty in fulfillment of the obligation undertaken by him in compliance with clause (B) of the first sentence of this paragraph, such person shall be ordered to active duty for training with such armed force in the grade in which he was commissioned for a period of active duty for training of not ~~less than six months~~ more than six months (not including duty performed under section 270(a) of title 10, United States Code), as determined by the Secretary of the military department concerned to be necessary to qualify such person for a mobilization assignment. Upon being commissioned and assigned to a reserve component, such person shall be required to serve therein, or in a reserve component of any other armed force in which he is later appointed, until the eighth anniversary of the receipt of such commission pursuant to the provisions of this section. So long as such person performs satisfactory service, as determined under regulations prescribed by the Secretary of Defense, he shall be deferred from training and service under the provisions of this Act. If such person fails to perform satisfactory service, and such failure is not excused under regulations prescribed by the Secretary of Defense, his commission may be revoked by the Secretary of the military department concerned.

(2) In addition to the training programs enumerated in paragraph (1) of this subsection, and under such regulations as the Secretary of Defense (or the Secretary of the Treasury with respect to the United States Coast Guard) may approve, the Secretaries of the military departments and the Secretary of the Treasury are authorized to establish officer candidate programs leading to the commissioning of persons on active duty. Any person heretofore or hereafter enlisted in the Army Reserve, the Naval Reserve, the Marine Corps Reserve, the Air Force Reserve, or the Coast Guard Reserve who thereafter has been or may be commissioned therein upon graduation from an Officers' Candidate School of such Armed Force shall, if not ordered to active duty as a commissioned officer, be deferred from training and service under the provisions of this Act so long as he performs satisfactory service as a commissioned officer in an appropriate unit of the Ready Reserve, as determined under regulations prescribed by the Secretary of the department concerned. If such person fails to perform satisfactory service in such unit, and such failure is not excused under such regulations, his commission may be revoked by such Secretary.

(3) Nothing in this subsection shall be deemed to preclude the President from providing, by regulation prescribed under subsection (h) of this section, for the deferment from training and service of any category or categories of students for such periods of time as he may deem appropriate.

(4) [Paragraph (4) terminated as of July 1, 1973, pursuant to section 9 of Public Law 85-62, June 27, 1957 (71 Stat. 208), as last amended by section 103 of Public Law 92-129, September 28, 1971 (85 Stat. 355)]

(5) Notwithstanding paragraph (1), upon the successful completion by any person of the required course of instruction under any Reserve Officers' Training Corps program listed in clause (A) of the first sentence of paragraph (1) and subject to the approval of the Secretary of the military department having jurisdiction over him, such person may, without being relieved of his obligation under that sentence, be tendered, and accept, a commission in the Coast and Geodetic Survey<sup>10</sup> instead of a commission in the appropriate reserve component of the Armed Forces. If he does not serve on active duty as a commissioned officer of the Coast and Geodetic Survey for at least six years, he shall, upon discharge therefrom, be tendered a commission in the appropriate reserve component of the Armed Forces, if he is otherwise qualified for such appointment, and, in fulfillment of his obligation under the first sentence of paragraph (1), remain a member of a reserve component until the sixth anniversary of the receipt of his commission in the Coast and Geodetic Survey. While a member of a reserve component he may, in addition to as otherwise provided by law, be ordered to active duty for such period that, when added to the period he served on active duty as a commissioned officer of the Coast and Geodetic Survey, equals two years.

#### [Aviation Cadet Applicants]

(e) Fully qualified and accepted aviation cadet applicants of the Army, Navy, or Air Force who have signed an agreement of service shall, in such numbers as may be designated by the Secretary of Defense, be deferred, during the period covered by the agreement but not to exceed four months, from induction for training and service under this title but shall not be exempt from registration.

#### [Certain Public Officials]

(f) The Vice President of the United States; the governors of the several States, Territories, and possessions, and all other officials chosen by the voters of the entire State, Territory, or possession; members of the legislative bodies of the United States and of the

several States, Territories, and possessions; judges of the courts of record of the United States and of the several States, Territories, possessions, and the District of Columbia shall, while holding such offices, be deferred from training and service under this title in the armed forces of the United States.

**[Ministers of Religion; Students Preparing for the Ministry]**

(g)(1) Regular or duly ordained ministers of religion, as defined in this title, shall be exempt from training and service, but not from registration, under this title.

(2) Students preparing for the ministry under the direction of recognized churches or religious organizations, who are satisfactorily pursuing full-time courses of instruction in recognized theological or divinity schools, or who are satisfactorily pursuing full-time courses of instruction leading to their entrance into recognized theological or divinity schools in which they have been preenrolled, shall be deferred from training and service, but not from registration, under this title. Persons who are or may be deferred under provisions of this subsection shall remain liable for training and service in the Armed Forces under the provisions of section 4(a) of this Act until the thirty-fifth anniversary of the date of their birth. The foregoing sentence shall not be construed to prevent the exemption or continued deferment of such persons if otherwise exempted or deferrable under any other provision of this Act.

**[Deferment for Occupations, Dependency, Fitness, Extended Liability; Criteria]**

(h) Except as otherwise provided in this subsection the President is authorized, under such rules and regulation as he may prescribe, to provide for the deferment from training and service in the Armed Forces of any or all categories of persons whose employment in industry, agriculture, or other occupations or employment, or whose continued service in an Office (other than an Office described in subsection (f)) under the United States or any State, territory or possession, or the District of Columbia, or whose activity in study, research, or

**health occupational, scientific**

or other endeavors is found to be necessary to the maintenance of the national health, safety, or interest: *Provided*, That no person within any such category shall be deferred except upon the basis of his individual status: *Provided further*, That persons who are or may be deferred under the provisions of this section shall remain liable for training and service in the Armed Forces under the provisions of section 4(a) of this Act until the thirty-fifth anniversary of the date of their birth. This proviso shall not be construed to prevent the continued deferment of such persons if otherwise deferrable under any other provisions of this Act. The President is also authorized, under such rules and regulations as he may prescribe, to provide for the deferment from training and service in the Armed Forces (1) of any or all categories of persons in a status with respect to persons (other than wives alone, except in cases of extreme hardship) dependent upon them for support which renders their deferment advisable, and (2) of any or all categories of those persons found to be physically, mentally, or morally deficient or defective. For the purpose of determining whether or not the deferment of any person is advisable, because of his status with respect to persons dependent upon him for support, any payments of allowances which are payable by the United States to the dependents of persons serving in the Armed Forces of the United States shall be taken into consideration, but the fact that such payments of allowances are payable shall not be deemed conclusively to remove the grounds for deferment when the dependency is based upon financial considerations and shall not be deemed to remove the ground for deferment when the dependency is based upon other than financial considerations and cannot be eliminated by financial assistance to the dependents. Except as otherwise provided in this



subsection, the President is also authorized, under such rules and regulations as he may prescribe, to provide for the deferment from training and service in the Armed Forces of any or all categories of persons who have children, or wives and children, with whom they maintain a bona fide family relationship in their homes. No deferment from such training and service in the Armed Forces shall be made in the case of any individual except upon the basis of the status of such individual. There shall be posted in a conspicuous place at the office of each local board a list setting forth the names and classification of those persons who have been classified by such local board. The President may, in carrying out the provisions of this title, recommend criteria for the classification of persons subject to induction under this title, and to the extent that such action is determined by the President to be consistent with the national interest, recommended that such criteria be administered uniformly throughout the United States whenever practicable; except that no local board, appeal board, or other agency of appeal of the Selective Service System shall be required to postpone or defer any person by reason of his activity in study, research, or

#### health occupational, scientific

or other endeavors found to be necessary to the maintenance of the national health, safety, or interest solely on the basis of any test, examination, selection system, class standing, or any other means conducted, sponsored, administered, or prepared by any agency or department of the Federal Government, or any private institution, corporation, association, partnership, or individual employed by an agency or department of the Federal Government.

#### [Postponement of Induction of Students]

(1) Any person who is satisfactorily pursuing a full-time course of instruction at a high school or similar institution of learning and is issued an order for induction shall, upon the facts being presented to the local board, have his induction postponed (A) until the time of his graduation therefrom, or (B) until he attains the twentieth anniversary of his birth, or (C) until he ceases satisfactorily to pursue such course of instruction, whichever is the earliest. Notwithstanding the preceding sentence, any person who attains the twentieth anniversary of his birth after beginning his last academic year of high school shall have his induction postponed until the end of that academic year if and so long as he continues to pursue satisfactorily a full-time course of instruction.

(2) Any person who while satisfactorily pursuing a full-time course of instruction at a college, university, or similar institution is ordered to report for induction under this title, shall, upon the appropriate facts being presented to the local board, have his induction postponed (A) until the end of the semester or term, or academic year in the case of his last academic year, or (B) until he ceases satisfactorily to pursue such course of instruction, whichever is the earlier.

#### [Conscientious Objectors]

(j) Nothing contained in this title shall be construed to require any person to be subject to combatant training and service in the armed forces of the United States who, by reason of religious training and belief, is conscientiously opposed to participation in war in any form. As used in this subsection, the term "religious training and belief" does not include essentially political, sociological, or philosophical views, or a merely personal moral code. Any person claiming exemption from combatant training and service because of such conscientious objections whose claim is sustained by the local board shall, if he is inducted into the armed forces under this title, be assigned to noncombatant service as defined by the President, or shall, if he is found to be conscientiously opposed to participation in such noncombatant service, in lieu of such induction, be ordered by his local board, subject to such regulations as the

President may prescribe, to perform for a period equal to the period prescribed in section 4(b) such civilian work contributing to the maintenance of the national health, safety, or interest as the Director may deem appropriate and any such person who knowingly fails or neglects to obey any such order from his local board shall be deemed, for the purposes of section 12 of this title, to have knowingly failed or neglected to perform a duty required of him under this title. The Director shall be responsible for finding civilian work for persons exempted from training and service under this subsection and for the placement of such persons in appropriate civilian work contributing to the maintenance of the national health, safety, or interest.

#### **[Duration of Exemption of Deferment]**

(k) No exception from registration, or exemption or deferment from training and service, under this title, shall continue after the cause therefor ceases to exist.

#### **[Minority Discharges]**

(l) Notwithstanding any other provisions of law, no person between the ages of eighteen and twenty-one shall be discharged from service in the armed forces of the United States while this title is in effect because such person entered such service without the consent of his parent or guardian.

#### **[Moral Standards]**

(m) No person shall be relieved from training and service under this title by reason of conviction of a criminal offense, except where the offense of which he has been convicted may be punished by death, or by imprisonment for a term exceeding one year.

#### **[Appeals; Occupational Deferments]**

(n) In the case of any registrant whose principal place of employment is located outside the appeal board area in which the local board having jurisdiction over the registrant is located, any occupational deferment made under subsection (h) of this section may, within five days after such deferment is made, be submitted for review and decision to the appeal board having jurisdiction over the area in which is located the principal place of employment of the registrant. Such decision of the appeal board shall be final unless modified or changed by the President, and such decision shall be made public.

#### **[Surviving Son or Brother]**

(o) Except during the period of a war or a national emergency declared by Congress, no person may be inducted for training and service under this title unless he volunteers for such induction—

(1) if the father or a brother or a sister of such person was killed in action or died in line of duty while serving in the Armed Forces after December 31, 1959, or died subsequent to such date as a result of injuries received or disease incurred in line of duty during such service, or

(2) during any period of time in which the father or a brother or a sister of such person is in a captured or missing status as a result of such service.

As used in this subsection, the term "brother" or "sister" means a brother of the whole blood or a sister of the whole blood, as the case may be.

DRAFT: Suggested wording

subsection 3(a)(2)

SEC. 7. Notwithstanding section 5521 of title 5, United States Code, or any other law, the President, by regulation, may direct any person registered under section 3 of this title to provide the Director with information needed to determine the person's abilities to meet health needs of the Armed Forces. This information may include, but not be limited to, education, training, occupational certifications, licensing and fields of specialization.

[BOUNTIES FOR ENLISTMENT OR INDUCTION; SUBSTITUTES; PURCHASES OF RELEASE]

Sec. 8. [50 U.S.C. App. 458] No bounty may be paid to induce any person to be inducted into an armed force. A clothing allowance authorized by law is not a bounty for the purposes of this section. No person liable for training and service under this Act may furnish a substitute for that training or service. No person may be enlisted, inducted, or appointed in an armed force as a substitute for another. No person liable for training and service under section 4 may escape that training and service or be discharged before the end of his period of training and service by paying money or any other valuable thing as consideration for his release from that training and service or liability therefor.

[SEPARATION FROM SERVICE; REEMPLOYMENT RIGHTS]

[Certificates of Service]

Sec. 9. [50 U.S.C. App. 459] (a) Any person inducted into the armed forces under this title for training and service, who, in the judgment of those in authority over him, satisfactorily completes his period of training and service under section 4(b) shall be entitled to a certificate to that effect upon the completion of such period of training and service, which shall include a record of any special proficiency or merit attained. In addition, each such person who is inducted into the armed forces under this title for training and service shall be given a physical examination at the beginning of such training and service, and upon the completion of his period of training and service under this title, each such person shall be given another physical examination and, upon his written request, shall be given a statement of physical condition by the Secretary concerned: *Provided*, That such statement shall not contain any reference to mental or other conditions which in the judgment of the Secretary concerned would prove injurious to the physical or mental health of the person to whom it pertains: *Provided further*, That, if upon completion of training and service under this title, such person continues on active duty without an interruption of more than seventy-two hours as a member of the Armed Forces of the United States, a physical examination upon completion of such training and service shall not be required unless it is requested by such person, or the medical authorities of the Armed Force concerned determine that the physical examination is warranted.

**[Right to Vote; Manner; Poll Tax]**

(b) Any person inducted into the armed forces for training and service under this title shall, during the period of such service, be permitted to vote in person or by absentee ballot in any general, special, or primary election occurring in the State of which he is a resident, whether he is within or outside such State at the time of such election, if under the laws of such State he is otherwise entitled so to vote in such election; but nothing in this subsection shall be construed to require granting to any such person a leave of absence or furlough for longer than one day in order to permit him to vote in person in any such election. No person inducted into, or enlisted in, the armed forces for training and service under this title shall, during the period of such service, as a condition of voting in any election for President, Vice President, electors for President or Vice President, or for Senator or Member of the House of Representatives, be required to pay any poll tax or other tax or make any other payment to any State or political subdivision thereof.

**[Reports on Separated Personnel]**

(c) The Secretaries of Army, Navy, Air Force, or Transportation shall furnish to the Selective Service System hereafter established a report of separation for each person separated from active duty.

**THE SELECTIVE SERVICE SYSTEM; CONSTRUCTION; CIVILIAN EMPLOYERS**

**[Establishment of Selective Service System]**

SEC. 10. [50 U.S.C. App. 460] (a)(1) There is hereby established in the executive branch of the Government an agency to be known as the Selective Service System, and a Director of Selective Service shall be the head thereof.

(2) The Selective Service System shall include a national headquarters, at least one State headquarters in each State, Territory, and possession of the United States, and in the District of Columbia, and the local boards, appeals boards, and other agencies provided for in subsection (b)(3) of this section.

(3) The Director shall be appointed by the President, by and with the advice and consent of the Senate.

(4) The functions of the Office of Selective Service Records (established by the Act of March 31, 1947) and of the Director of the Office of Selective Service Records are hereby transferred to the Selective Service System and the Director of Selective Service, respectively. The personnel, property, records, and unexpended balances (available or to be made available) of appropriations, allocations, and other funds of the Office of Selective Service Records are hereby transferred to the Selective Service System. The Office of Selective Service Records shall cease to exist upon the taking of effect of the provisions of this title: *Provided, That*, effective upon the termination of this title and notwithstanding such termination in other respects, (A) the said Office of Selective Service Records is hereby established on the same basis and with the same functions as obtained prior to the effective date of this title, (B) said reestablished Office shall be responsible for liquidating any other outstanding affairs of the Selective Service System, and (C) the personnel, property, records, and unexpended balances (available or to be made available) of appropriations, allocations, and other funds of the Selective Service System shall be transferred to such reestablished Office of Selective Service Records.

[Administrative Provisions]

(b) The President is authorized—

(1) to prescribe the necessary rules and regulations to carry out the provisions of this title;

(2) to appoint, upon recommendation of the respective governor or comparable executive official, a State director of the Selective Service System for each headquarters in each State, Territory, and possession of the United States and for the District of Columbia, who shall represent the governor and be in immediate charge of the State headquarters of the Selective Service System: *Provided*, That no State director shall serve concurrently in an elected or appointed position of a State or local government without the approval of the Director; to employ such number of civilians, and to order to active duty with their consent and to assign to the Selective Service System such officers of the selective-service section of the State headquarters and headquarters detachments and such other officers of the federally recognized National Guard of the United States or other armed forces personnel (including personnel of the reserve components thereof), as may be necessary for the administration of the national and of the several State headquarters of the Selective Service System;

(3) to create and establish within the Selective Service System civilian local boards, civilian appeal boards, and such other civilian agencies, including agencies of appeal, as may be necessary to carry out its functions with respect to the registration, examination, classification, selection, assignment, delivery for induction, and maintenance of records of persons registered under this title, together with such other duties as may be assigned under this title: *Provided*, That no person shall be disqualified from serving as a counselor to registrants, including service as Government appeal agent, because of his membership in a Reserve component of the Armed Forces. He shall create and establish one or more local boards in each county or political subdivision corresponding thereto of each State, territory, and possession of the United States, and in the District of Columbia. The local board and/or its staff shall perform their official duties only within the county or political subdivision corresponding thereto for which the local board is established, or in the case of an intercounty board, within the area for which such board is established, except that the staffs of local boards in more than one county of a State or comparable jurisdiction may be collocated or one staff may serve local boards in more than one county of a State or comparable jurisdiction when such action is approved by the Governor or comparable executive official or officials. Each local board shall consist of three or more members to be appointed by the President from recommendations made by the respective Governors or comparable executive officials. In making such appointment after the date of the enactment of the Act enacting this sentence, the President is requested to appoint the membership of each local board so that to the maximum extent practicable it is proportionately representative of the race and national origin of those registrants within its jurisdiction, but no action by any local board shall be declared invalid on the ground that any board failed to conform to any particular quota as to race or national origin. No citizen shall be denied membership on any local board or appeal board on account of sex. After December 31, 1971, no person shall serve on any local board or appeal board ~~who has served~~ who has served on any local board or appeal board for a period of more than 20 years. Notwithstanding any other provision of this paragraph, an intercounty local board consisting of at least one member from each component county or corresponding subdivision may, with the approval of the Governor or comparable executive official or officials, be established for an area not exceeding five counties or political subdivisions corresponding thereto within a State or comparable jurisdiction when the President determines, after considering the public interest involved, that the establishment of such local board will result in

county local board shall have within its area the same power and jurisdiction as a local board has in its area. A local board may include among its members any citizen otherwise qualified under Presidential regulations, provided he is at least eighteen years of age. No member of any local board shall be a member of the Armed Forces of the United States, but each member of any local board shall be a civilian who is a citizen of the United States residing in the county or political subdivision corresponding thereto in which such local board has jurisdiction, and each intercounty local board shall have at least one member from each county or political subdivision corresponding thereto included within the intercounty local board area. Such local boards, or separate panels thereof each consisting of three or more members, shall, under rules and regulations prescribed by the President, have the power within the respective jurisdictions of such local boards to hear and determine, subject to the right of appeal to the appeal boards hereby authorized, all questions or claims with respect to inclusion for, or exemption or deferment from, training and service under this title, of all individuals within the jurisdiction of such local boards. The decisions of such local board shall be final, except where an appeal is authorized and is taken in accordance with such rules and regulations as the President may prescribe. There shall be not less than one appeal board located within the area of each Federal judicial district in the United States and within each Territory and possession of the United States, and such additional separate panels thereof, as may be prescribed by the President. Appeal boards within the Selective Service System shall be composed of civilians who are citizens of the United States and who are not members of the armed forces. The decision of such appeal boards shall be final in cases before them on appeal unless modified or changed by the President. The President, upon appeal or upon his own motion, shall have power to determine all claims or questions with respect to inclusion for, or exemption or deferment from training and service under this title, and the determination of the President shall be final. No judicial review shall be made of the classification or processing of any registrant by local boards, appeal boards, or the President, except as a defense to a criminal prosecution instituted under section 12 of this title, after the registrant has responded either affirmatively or negatively to an order to report for induction, or for civilian work in the case of a registrant determined to be opposed to participation in war in any form: *Provided*, That such review shall go to the question of the jurisdiction herein reserved to local boards, appeals boards, and the President only when there is no basis in fact for the classification assigned to such registrant. No person who is a civilian officer, member, agent, or employee of the Office of Selective Service Records, or the Selective Service System, or of any local board or appeal board or other agency of such Office or System, shall be excepted from registration or deferred or exempted from training and service, as provided for in this title, by reason of his status as such civilian officer, member, agent, or employee;

(4) to appoint, and to fix, in accordance with the provisions of chapter 51 and subchapter III of chapter 53 of title 5, United States Code, relating to classification and General Schedule pay rates, the basic pay of such officers, agents, and employees as he may deem necessary to carry out the provisions of this title, however, any officer ~~of the armed forces, or any officer or employee of any department or agency of the United States who may be assigned or detailed to any office or position to carry out the provisions of this title (except to officers of positions on local boards or appeal boards established or created pursuant to section 10(b)(3)) may serve in and perform the functions of such office or position without loss of or prejudice to his status as such officer in the armed forces or as such officer or employee in any department or agency of the United States;~~

(5) to utilize the services of any or all departments and any and all officers or agents of the United States, and to accept the services of all officers and agents of the several States, Territories, and possessions, and subdivisions thereof, and the District of Columbia, and of private welfare organizations, in the execution of this title;

(6) to purchase such printing, binding, and blank-book work from public, commercial, or private printing establishments or binderies upon orders placed by the Public Printer or upon waivers issued in accordance with section 12 of the Printing Act approved January 12, 1895, as amended,<sup>11</sup> and to obtain by purchase, loan, or gift such equipment and supplies for the Selective Service System, as he may deem necessary to carry out the provisions of this title, with or without advertising or formal contract;

(7) to prescribe eligibility, rules, and regulations governing the parole for service in the armed forces, or for any other special service established pursuant to this title, of any person convicted of a violation of any of the provisions of this title;

(8) subject to the availability of funds appropriated for such purpose, to procure such space as he may deem necessary to carry out the provisions of this title and Public Law 26, Eightieth Congress, approved March 31, 1947, by lease pursuant to existing statutes, except that the provisions of the Act of June 30, 1932 (47 Stat. 412), as amended by section 15 of the Act of March 3, 1933 (47 Stat. 1517; 40 U.S.C. 278a), shall not apply to any lease entered into under the authority of this title;

(9) subject to the availability of funds appropriated for such purposes, to determine the location of such additional temporary installations as he may deem essential; to utilize and enlarge such existing installations; to construct, install, and equip, and to complete the construction, installation, and equipment of such buildings, structures, utilities, and appurtenances (including the necessary grading and removal, repair or remodeling of existing structures and installations), as may be necessary to carry out the provisions of this title; and, in order

to accomplish the purpose of this title, to acquire lands and rights pertaining thereto, or other interests therein, for temporary use thereof, by donation or lease, and to prosecute construction thereon prior to the approval of the title by the Attorney General as required by section 355, Revised Statutes, as amended;

(10) subject to the availability of funds appropriated for such purposes, to utilize, in order to provide and furnish such services as may be deemed necessary or expedient to accomplish the purposes of this title, such personnel of the armed force and of Reserve components thereof with their consent, and such civilian personnel, as may be necessary. For the purpose of this title, the provisions of section 14 of the Federal Employees' Pay Act of 1946 (Public Law 390, Seventy-ninth Congress)<sup>12</sup> with respect to the maximum limitations as to the number of civilian employees shall not be applicable to the Department of the Army, the Department of the Navy, or the Department of the Air Force.

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#### [Delegation of Authority]

(c) The President is authorized to delegate any authority vested in him under this title, and to provide for the subdelegation of such authority.

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he President

(d) The President shall establish a National Advisory Committee on Health Occupational Personnel which shall advise on the administration of those portions of this act pertaining to induction of health personnel. The members of the Committee shall be selected from among persons who are outstanding in the health occupations.

[Gifts]

(e) In the administration of this title, gifts of supplies, equipment, and voluntary services may be accepted.

[Settlement of Travel Claims]

(f) The Director is authorized to make final settlement of individual claims, for amounts not exceeding \$500, for travel and other expenses of uncompensated personnel of the Office of Selective Service Records, or the Selective Service System, incurred while in the performance of official duties, without regard to other provisions of law governing the travel of civilian employees of the Federal Government.

[Semiannual Report to Congress]

(g) The Director of Selective Service shall submit to Congress semiannually a written report covering the operation of the Selective Service System and such report shall include, by States, information as to the number of persons registered under this Act; the number of persons inducted into military service under this Act; the number of deferments granted under this Act and the basis for such deferments; and such other specific kinds of information as the Congress may from time to time request.

[Maintenance of Selective Service System as Active Standby Organization After Institution of All Volunteer Program]

(h) If at any time calls under this section for the induction of persons for training and service in the Armed Forces are discontinued because the Armed Forces are placed on an all volunteer basis for meeting their active duty manpower needs, the Selective Service System, as it is constituted on the date of the enactment of this subsection, shall, nevertheless, be maintained as an active standby organization, with (1) a complete registration and classification structure capable of immediate operation in the event of a national emergency and (2) personnel adequate to reinstitute immediately the full operation of the System, including military reservists who are trained to operate such System and who can be ordered to active duty for such purpose in the event of a national emergency.

[EMERGENCY MEDICAL CARE]

SEC. 11. [50 U.S.C. App. 461] Under such rules and regulations as may be prescribed by the President, funds available to carry out the provisions of this title shall also be available for the payment of actual and reasonable expenses of emergency medical care, including hospitalization, of registrants who suffer illness or injury, and the transportation and burial of the remains of registrants who suffer death while in the service.



sions of this title, but such burial expenses shall not exceed the maximum that the Administrator of Veterans' Affairs may pay under the provisions of section 902(a) of title 38, United States Code, in any one case.

#### PENALTIES

Sec. 12. [50 U.S.C. App. 462] (a) Any member of the Selective Service System or any other person charged as herein provided with the duty of carrying out any of the provisions of this title, or the rules or regulations made or directions given thereunder, who shall knowingly fail or neglect to perform such duty, and any person charged with such duty, or having and exercising any authority under said title, rules, regulations, or directions who shall knowingly make, or be a party to the making, of any false, improper, or incorrect registration, classification, physical or mental examination, deferment, induction, enrollment, or muster, and any person who shall knowingly make, or be a party to the making of, any false statement or certificate regarding or bearing upon a classification or in support of any request for a particular classification, for service under the provisions of this title, or rules, regulations, or directions made pursuant thereto, or who otherwise evades or refuses registration or service in the armed forces or any of the requirements of this title, or who knowingly counsels, aids, or abets another to refuse or evade registration or service in the armed forces or any of the requirements of this title, or of said rules, regulations, or directions, or who in any manner shall knowingly fail or neglect or refuse to perform any duty required of him under or in the execution of this title, or rules, regulations, or directions made pursuant to this title, or any person or persons who shall knowingly hinder or interfere or attempt to do so in any way, by force or violence or otherwise, with the administration of this title or the rules or regulations made pursuant thereto, or who conspires to commit any one or more of such offenses, shall, upon conviction in any district court of the United States of competent jurisdiction, be punished by imprisonment for not more than five years or a fine of not more than \$10,000, or by both such fine and imprisonment, or if subject to military or naval law may be tried by court martial, and, on conviction, shall suffer such punishment as a court martial may direct. No person shall be tried by court martial in any case arising under this title unless such person has been actually inducted for the training and service prescribed under this title or unless he is subject to trial by court martial under laws in force prior to the enactment of this title. Precedence shall be given by courts to the trial of cases arising under this title, and such cases shall be advanced on the docket for immediate hearing, and an appeal from the decision or decree of any United States district court or United States court of appeals shall take precedence over all other cases pending before the court to which the case has been referred.

(b) Any person (1) who knowingly transfers or delivers to another, for the purpose of aiding or abetting the making of any false identification or representation, any registration certificate, alien's certificate of nonresidence, or any other certificate issued pursuant to or prescribed by the provisions of this title, or rules or regulations promulgated hereunder; or (2) who, with intent that it be used for any purpose of false identification or representation, has in his possession any such certificate not duly issued to him; or (3) who forges, alters, knowingly destroys, knowingly mutilates, or in any manner changes any such certificate or any notation duly and validly inscribed thereon; or (4) who, with intent that it be used for any purpose of false identification or representation, photographs, prints, or in any manner makes or executes any engraving, photograph, print, or impression in the likeness of such certificate, or any colorable imitation thereof; or (5) who has in his possession any certificate purporting to be a certificate issued pursuant to this title, or rules and regulations promulgated hereunder, which he knows to be falsely made, reproduced, forged, counterfeited, or altered; or (6) who knowingly violates or evades any of the provisions of this title or rules and regulations promulgated pursuant thereto

relating to the issuance, transfer, or possession of such certificate, shall upon conviction, be fined not to exceed \$10,000 or be imprisoned for not more than five years, or both. Whenever on trial for a violation of this subsection the defendant is shown to have or to have had possession of any certificate not duly issued to him, such possession shall be deemed sufficient evidence to establish an intent to use such certificate for purposes of false identification or representation, unless the defendant explains such possession to the satisfaction of the jury.

(c) The Department of Justice shall proceed as expeditiously as possible with a prosecution under this section, or with an appeal, upon the request of the Director of Selective Service System or shall advise the House of Representatives and the Senate in writing the reasons for its failure to do so.

(d) No person shall be prosecuted, tried, or punished for evading, neglecting, or refusing to perform the duty of registering imposed by section 3 of this title unless the indictment is found within five years next after the last day before such person attains the age of twenty-six, or within five years next after the last day before such person does perform his duty to register, whichever shall first occur.

except that, in the case of a person who is required to register under subsection 3(a)(2) of this title, an indictment must be found within five years after the last day before such individual is required to perform a duty to register, submit to induction, or any other duty required by the Military Selective Service Act (50 U.S.C. App. ea) 451

*"(e) The President may require the Secretary of Health and Human Services to furnish to the Director, from records available to the Secretary, the following information with respect to individuals who are members of any group of individuals required by a proclamation of the President under section 3 to present themselves for and submit to registration under such section: name, date of birth, social security account number, and address. Information furnished to the Director by the Secretary under this subsection shall be used only for the purpose of the enforcement of this Act."*

#### NONAPPLICABILITY OF CERTAIN LAWS

Sec. 13. [50 U.S.C. App. 463] (a) Nothing in section 203, 205, or 207 of title 18 of the United States Code, or in the second sentence of subsection (a) of section 9 of the Act of August 2, 1939 (53 Stat. 1148), entitled "An Act to prevent pernicious political activities", as amended,<sup>13</sup> shall be deemed to apply to any person because of his appointment under authority of this title or the regulations made pursuant thereto as an uncompensated official of the Selective Service System, or as an individual to conduct hearings on appeals of persons claiming exemption from combatant or noncombatant training because of conscientious objections, or as a member of the National Selective Service Appeal Board.

(b) All functions performed under this title shall be excluded from the operation of the Administrative Procedure Act (60 Stat. 237)<sup>14</sup> except as to the requirements of section 3 of such Act. Notwithstanding the foregoing sentence, no regulation issued under this Act shall become effective until the expiration of thirty days following the date on which such regulation has been published in the Federal Register. After the publication of any regulation and prior to the date on which such regulation becomes effective, any person shall be given an opportunity to submit his views to the Di-

rector on such regulation, but no formal hearing be required on any such regulation. The requirements of this subsection may be waived by the President in the case of any regulation if he (1) determines that compliance with such requirements would materially impair the national defense, and (2) gives public notice to that effect at the time such regulation is issued.

(c) In computing the lump-sum payments made to Air Force Reserve Officers under the provisions of section 2 of the Act of June 16, 1936, as amended (U.S.C., title 10, sec. 300a<sup>16</sup>), and to Reserve officers of the Navy or to their beneficiaries under section 12 of the Act of August 4, 1942, as amended (U.S.C., title 34, sec. 850k<sup>16</sup>), no credit shall be allowed for any period of active service performed from the effective date of this title to the date on which this title shall cease to be effective. Each such lump-sum payment shall be prorated for a fractional part of a year of active service in the case of any reserve officer subject to the provisions of either such section, if such reserve officer performs continuous active service for one or more years (inclusive of such service performed during the period in which this title is effective) and such active service includes a fractional part of a year immediately prior to the effective date of this title, or immediately following the date on which this title shall cease to be effective, or both.

#### CIVIL RELIEF

Sec. 14. [50 U.S.C. App. 464] Notwithstanding the provisions of section 604 of the Act of October 17, 1940 (54 Stat. 1191), and the provisions of section 4 of the Act of July 25, 1947 (Public Law 239, Eightieth Congress), all of the provisions of the Soldiers' and Sailors' Civil Relief Act of 1940, as amended, including specifically article IV thereof, shall be applicable to all persons in the Armed Forces of the United States, including all persons inducted into the Armed Forces pursuant to this title or the Public Health Service, until such time as the Soldiers' and Sailors' Civil Relief Act of 1940, as amended, is repealed or otherwise terminated by subsequent Act of the Congress: *Provided, That, with respect to persons inducted into the armed forces while this title is in effect, wherever under any section or provision of the Soldiers' and Sailors' Civil Relief Act of 1940, as amended, a proceeding, remedy, privilege, stay, limitation, accounting, or other transaction has been authorized or provided with respect to military service performed while such Act is in force, such section or provision shall be deemed to continue in full force and effect so long as may be necessary to the exercise or enjoyment of such proceeding, remedy, privilege, stay, limitation, accounting, or other transaction.*

#### NOTICE OF TITLE; VOLUNTARY ENLISTMENTS

Sec. 15. [50 U.S.C. App. 465] (a) Every person shall be deemed to have notice of the requirements of this title upon publication by the President of a proclamation or other public notice fixing a time for any registration under section 3.

(b) It shall be the duty of every registrant to keep his local board informed as to his current address and changes in status as required by such rules and regulations as may be prescribed by the President.

(c) If any provision of this title, or the application thereof to any person or circumstance, is held invalid, the remainder of the title, and the application of such provision to other persons or circumstances, shall not be affected thereby.

(d) Except as provided in section 4(c), nothing contained in this title shall be construed to repeal, amend, or suspend the laws now in force authorizing voluntary enlistment or reenlistment in the Armed Forces of the United States, including the reserve components thereof, except that no person shall be accepted for enlistment after he has been issued an order to report for induction unless authorized by the Director and the Secretary of Defense and except that, whenever the Congress or the President has declared that the national interest is imperiled, voluntary enlistment or reenlistment in such forces, and their reserve components, may be

suspended by the President to such extent as he may deem necessary in the interest of national defense.

*"(e) In order to assist the Armed Forces in recruiting individuals for voluntary service in the Armed Forces, the Director shall, upon the request of the Secretary of Defense or the Secretary of Transportation, furnish to the Secretary the names and addresses of individuals registered under this Act. Names and addresses furnished pursuant to the preceding sentence may be used by the Secretary of Defense or Secretary of Transportation only for recruiting purposes."*

#### DEFINITIONS

SEC. 16. [50 U.S.C. App. 466] When used in this title—

(a) The term "between the ages of eighteen and twenty-six" shall refer to men who have attained the eighteenth anniversary of the day of their birth and who have not attained the twenty-sixth anniversary of the day of their birth; and other terms designating different age groups shall be construed in a similar manner.

(b) The term "United States", when used in a geographical sense, shall be deemed to mean the several States, the District of Columbia, Puerto Rico, the Virgin Islands, and Guam.

(c) The term "armed forces" shall be deemed to include the Army, the Navy, the Marine Corps, the Air Force, and the Coast Guard.

(d) The term "district court of the United States" shall be deemed to include the courts of the United States for the Territories and possessions of the United States.

(e) The term "local board" shall be deemed to include an inter-county local board in the case of any registrant who is subject to the jurisdiction of an intercounty local board.

(f) The term "Director" shall be deemed to mean the Director of the Selective Service System.

(g)(1) The term "duly ordained minister of religion" means a person who has been ordained, in accordance with the ceremonial, ritual, or discipline of a church, religious sect, or organization established on the basis of a community of faith and belief, doctrines and practices of a religious character, to preach and to teach the doctrines of such church, sect, or organization and to administer the rites and ceremonies thereof in public worship, and who as his regular and customary vocation preaches and teaches the principles of religion and administers the ordinances of public worship as embodied in the creed or principles of such church, sect, or organization.

(2) The term "regular minister of religion" means one who as his customary vocation preaches and teaches the principles of religion of a church, a religious sect, or organization of which he is a member, without having been formally ordained as a minister of religion, and who is recognized by such church, sect, or organization as a regular minister.

(3) The term "regular or duly ordained minister of religion" does not include a person who irregularly or incidentally preaches and teaches the principles of religion of a church, religious sect, or organization and does not include any person who may have been duly ordained a minister in accordance with the ceremonial, rite, or discipline of a church, religious sect or organization, but who does not regularly, as a bona fide vocation, teach and preach the principles of religion and administer the ordinances of public worship, as embodied in the creed or principles of his church, sect, or organization.

(h) The term "organized unit", when used with respect to a reserve component, shall be deemed to mean a unit in which the members thereof are required satisfactorily to participate in sched-

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uled drills and training periods as prescribed by the Secretary of Defense.

(i) The term "reserve components of the armed forces" shall, unless the context otherwise requires, be deemed to include the federally recognized National Guard of the United States, the federally recognized Air National Guard of the United States, the Officers' Reserve Corps, the Regular Army Reserve, the Air Force Reserve, the Enlisted Reserve Corps, the Naval Reserve, the Marine Corps Reserve, and the Coast Guard Reserve, and shall include, in addition to the foregoing, the Public Health Service Reserve when serving with the armed forces.

(j) The term "health occupation" means an occupation certified by the President as essential to meet the health needs of the Armed Forces. The occupations certified may include:

- (1) Physicians;
- (2) Dentists;
- (3) Optometrists;
- (4) Pharmacists;
- (5) Veterinarians;
- (6) Podiatrists;
- (7) Registered Nurses; and
- (8) Any other field involving the provision of health care directly to humans or animals and which requires a course of study and licensing, registration, or certification from either a state government or the Federal Government.

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*or which requires credentials under nationally recognized professional standards for health care.*

pired following the date on which such notice was transmitted to such committees and neither House of Congress has adopted, within such 60-day period, a resolution disapproving such order. For purposes of the preceding sentence, the continuity of a session of Congress is broken only by an adjournment of Congress sine die, and the days on which either House is not in session because of an adjournment of more than 3 days to a day certain are excluded in the computation of such 60-day period. Any person with whom an order is placed pursuant to the provisions of this section shall be advised that such order is placed pursuant to the provisions of this section. Under any such program of national procurement, the President shall recognize the valid claim of American small business to participate in such contracts, in such manufactures, and in such distribution of materials, and small business shall be granted a fair share of the orders placed, exclusively for the use of the armed forces or for other Federal agencies now or hereafter designated in this section. For the purposes of this section, a business enterprise shall be determined to be "small business" if (1) its position in the trade or industry of which is a part is not dominant, (2) the number of its employees does not exceed 500, and (3) it is independently owned and operated.

(b) It shall be the duty of any person with whom an order is placed pursuant to the provisions of subsection (a), (1) to give such order such precedence with respect to all other orders (Government or private) theretofore or thereafter placed with such person as the President may prescribe, and (2) to fill such order within the period of time prescribed by the President or as soon thereafter as possible.

(c) In case any person with whom an order is placed pursuant to the provisions of subsection (a) refuses or fails—

(1) to give such order such precedence with respect to all other orders (Government or private) theretofore or thereafter placed with such person as the President may have prescribed;

(2) to fill such order within the period of time prescribed by the President or as soon thereafter as possible as determined by the President;

(3) to produce the kind or quality of articles or materials ordered; or

(4) to furnish the quantity, kind, and quality of articles or materials ordered at such price as shall be negotiated between such person and the Government agency concerned; or in the event of failure to negotiate a price, to furnish the quantity, kind, and quality of articles or materials ordered at such price as he may subsequently be determined to be entitled to receive under subsection (d);

the President is authorized to take immediate possession of any plant, mine, or other facility of such person and to operate it, through any Government agency, for the production of such articles or materials as may be required by the Government.

(d) Fair and just compensation shall be paid by the United States (1) for any articles or materials furnished pursuant to an order placed under subsection (a), or (2) as rental for any plant, mine, or other facility of which possession is taken under subsection (c).

(e) Nothing contained in this section shall be deemed to render inapplicable to any plant, mine, or facility of which possession is taken pursuant to subsection (c) any State or Federal laws concerning the health, safety, security, or employment standards of employees.

(f) Any person, or any officer of any person as defined in this section, who willfully fails or refuses to carry out any duty imposed upon him by subsection (b) of this section shall be guilty of a felony and, upon conviction thereof, shall be punished by imprisonment for not more than three years, or by a fine of not more than \$50,000, or by both such imprisonment and fine.

(g)(1) As used in this section—

(A) The term "person" means any individual, firm, company, association, corporation, or other form of business organization.

(B) The term "Government agency" means any department, agency, independent establishment, or corporation in the Executive branch of the United States Government.

(2) For the purposes of this section, a plant, mine, or other facility shall be deemed capable of producing any articles or materials if it is then producing or furnishing such articles or materials or if the President after consultation with and receiving advice from the National Security Resources Board determines that it can be readily converted to the production or furnishing of such articles or materials.

(h)(1) The President is empowered, through the Secretary of Defense, to require all producers of steel in the United States to make available, to individuals, firms, associations, companies, corporations, or organized manufacturing industries having orders for steel products or steel materials required by the armed forces, such percentages of the steel production of such producers, in equal proportion deemed necessary for the expeditious execution of orders for such products or materials. Compliance with such requirement shall be obligatory on all such producers of steel and such requirement shall take precedence over all orders and contracts theretofore placed with such producers. If any such producer of steel or the responsible head or heads thereof refuses to comply with such requirement, the President, through the Secretary of Defense, is authorized to take immediate possession of the plant or plants of such producer and, through the appropriate branch, bureau, or department of the armed forces, to insure compliance with such requirement. Any such producer of steel or the responsible head or heads thereof refusing to comply with such requirements shall be deemed guilty of a felony and upon conviction thereof shall be punished by imprisonment for not more than three years and a fine not exceeding \$50,000.

(2) The President shall report to the Congress on the final day of each six-month period following the date of enactment of this Act the percentage figure, or if such information is not available, the approximate percentage figure, of the total steel production in the United States required to be made available during such period for the execution of orders for steel products and steel materials required by the armed forces, if such percentage figure is in excess of 10 per centum.

SAVING PROVISION

SEC. 19. [50 U.S.C. App. 469] Nothing in this title shall be deemed to amend any provision of the National Security Act of 1947 (61 Stat 495).

EFFECTIVE DATE

SEC. 20. [50 U.S.C. App. 470] This title shall become effective immediately; except that unless the President, or the Congress by concurrent resolution, declares a national emergency after the date of enactment of this Act, no person shall be inducted or ordered into active service without his consent under this title within ninety days after the date of its enactment.

AUTHORITY TO ORDER RESERVE COMPONENTS TO ACTIVE FEDERAL SERVICE

SEC. 21. [50 U.S.C. App. 471] Until July 1, 1953, and subject to the limitations imposed by section 2 of the Selective Service Act of 1948, as amended, the President shall be authorized to order into the active military or naval service of the United States for a period of not to exceed twenty-four consecutive months, with or without their consent, any or all members and units of any or all Reserve components of the Armed Forces of the United States and retired personnel of the Regular Armed Forces. Unless he is sooner released under regulations prescribed by the Secretary of the military department concerned, any member of the inactive or volunteer reserve who served on active duty for a period of 12 months or more in any branch of the Armed Forces between the period of December 7, 1941, and September 2, 1945, inclusive, who is now or may hereafter be ordered to active duty pursuant to this section, shall upon completion of 17 or more months of active duty since June 25, 1950, if he makes application therefor to the Secretary of the branch of service in which he is serving, be released from active duty and shall not thereafter be ordered to active duty for periods in excess of 30 days without his consent except in time of war or national emergency hereafter declared by the Congress: *Provided*, That the foregoing shall not apply to any member of the inactive or volunteer reserve ordered to active duty whose rating or specialty is found by the Secretary of the military department concerned to be critical and whose release to inactive duty prior to the period for which he was ordered to active duty would impair the efficiency of the military department concerned.

The President may retain the unit organizations and the equipment thereof, exclusive of the individual members thereof, in the active Federal service for a total period of five consecutive years, and upon being relieved by the appropriate Secretary from active Federal service, National Guard, or Air National Guard units, shall, insofar as practicable, be returned to their National Guard or Air National Guard status in their respective States, Territories, the District of Columbia, and Puerto Rico, with pertinent records, colors, histories, trophies, and other historical impedimenta.



PROCEDURAL RIGHTS

Sac. 22. [50 U.S.C. App. 471a] (a) It is hereby declared to be the purpose of this section to guarantee to each registrant asserting a claim before a local or appeal board, a fair hearing consistent with the informal and expeditious processing which is required by selective service cases.

(b) Pursuant to such rules and regulations as the President may prescribe—

(1) Each registrant shall be afforded the opportunity to appear in person before the local or any appeal board of the Selective Service System to testify and present evidence regarding his status.

(2) Subject to reasonable limitations on the number of witnesses and the total time allotted to each registrant, each registrant shall have the right to present witnesses on his behalf to the local board.

(3) A quorum of any local board or appeal board shall be present during the registrant's personal appearance.

(4) In the event of a decision adverse to the claim of the registrant, the local or appeal board making such decision shall, upon request, furnish to such registrant a brief written statement of the reasons for its decision.

[Title II, consisting largely of amendments to other provisions of law, was repealed by section 53 of the Act of August 10, 1956 (70A Stat. 678).]

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#### FOOTNOTES

<sup>1</sup>Interviews with various personnel at Selective Service System, Office of the Secretary of Defense (MR and AL and HA) Dept of the Army, Office of the Surgeon General, The Navy Medical Command, Washington, D.C.

<sup>2</sup>Public Law 81-779, 64 Stat 826.

<sup>3</sup>Tribble, William D., PhD., "Doctor Draft Justified, A Management Diagnosis," National Biomedical Laboratories, San Antonio, Texas, October 1968, p. 98.

<sup>4</sup>IBID p.99.

<sup>5</sup>Murphy, Constance, "Concept for the Registration Selection, Processing and Induction of Health Care Personnel," Unpublished Draft Concept Paper, Selective Service, 22 Nov 82 revised 9 Dec 82.

<sup>6</sup>Puschek, Herbert C., PhD., "Medical Personnel Mobilization and the Draft," A Discussion Paper prepared for the 1982 ICAF Mobilization Conference, 29-30 Nov 82, p. 3.

<sup>7</sup>IBID p. 7.

<sup>8</sup>IBID(4) p. 2.

<sup>9</sup>ICAF Mobilization Conference, "Reconciling Mobilization Capabilities and Strategic Needs in the 80's," 29-30 Nov 82.

<sup>10</sup>Smith, Paul, "Medical Mobilization Plans Readied," Army Times, 27 Dec 82, p. 30.

<sup>11</sup>"Wartime Nurse Shortage Expected to Total 23,500," Army Times, 27 Dec 82, p.30.

<sup>12</sup>IBID p.30.

<sup>13</sup>Emergency Mobilization Preparedness Board, Principle Working Group on Health, Plan of Action (Health-Manpower). Washington, D.C., Sep 82, p.5.

<sup>14</sup>Selective Service System, Semiannual Report of the Director of Selective Service for the Period 1 Oct 81-31 Mar 81 to the Congress of the U.S., p. 1.

15IBID p.1.

16Puschek, Herbert C. PhD., "Medical Personnel Mobilization and the Draft," A Discussion Paper prepared for the 1982 ICAF Mobilization Conference, 29-30 Nov 82, p.10.

17IBID p. 10.

18Turnage, Thomas K., MG ARNG(ret), "Mobilization and Expanding the Total Force," lecture, Industrial College of the Armed Forces, Washington, D.C., 10 Jan 83.

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